

State: District of Columbia **Filing Company:** Aetna Health Inc. PA AZ DC DE IN KY MA MD NV
NC OK TN VA WV
TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only
- HMO
Product Name: 2023 DC AHI SG HMO
Project Name/Number: 2023 Exchange - Aetna/HMO

Filing at a Glance

Company: Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN VA WV
Product Name: 2023 DC AHI SG HMO
State: District of Columbia
TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)
Sub-TOI: HOrg02G.004F Small Group Only - HMO
Filing Type: Rate
Date Submitted: 05/02/2022
SERFF Tr Num: AETN-133232225
SERFF Status: Assigned
State Tr Num:
State Status:
Co Tr Num: DCAHISG2023
Effective 01/01/2023
Date Requested:
Author(s): Joanna Kluza, Michelle Wanner, Su Yong Song, Aaron Cornett
Reviewer(s): Dave Dillon (primary), Efren Tanhehco
Disposition Date:
Disposition Status:
Effective Date:

State Filing Description:

State: District of Columbia **Filing Company:** Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN VA WV

TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO

Product Name: 2023 DC AHI SG HMO

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General Information

Project Name: 2023 Exchange - Aetna
Project Number: HMO
Requested Filing Mode: Review & Approval
Explanation for Combination/Other:
Submission Type: New Submission
Group Market Type: Employer
Filing Status Changed: 05/02/2022
State Status Changed:
Created By: Joanna Kluza
Corresponding Filing Tracking Number: 73987-2003721964618918924

Status of Filing in Domicile:
Date Approved in Domicile:
Domicile Status Comments:
Market Type: Group
Group Market Size: Small
Overall Rate Impact: -7.03%

Deemer Date:
Submitted By: Joanna Kluza

PPACA: Non-Grandfathered Immed Mkt Reforms

PPACA Notes: null

Exchange Intentions:

Includes forms for products to be offered to Small Groups on the DC Health Benefits Exchange.

Filing Description:

Aetna Health, Inc. 1Q23 Small Group HMO rate filing for DC.

The corresponding forms filing was submitted separately. The SERFF ID Number is AETN-133139939

Company and Contact

Filing Contact Information

Joanna Kluza, Actuarial Analyst
151 Farmington Ave
Hartford, CT 06156

KluzaJ@aetna.com
860-273-0099 [Phone]

Filing Company Information

Aetna Health Inc. PA AZ DC DE
IN KY MA MD NV NC OK TN VA
WV
1425 Union Meeting Road
Blue Bell, PA 19422
(999) 999-9999 ext. [Phone]

CoCode: 95109
Group Code: 1
Group Name:
FEIN Number: 23-2169745

State of Domicile:
Pennsylvania
Company Type:
State ID Number:

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Filing Fees

State Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

State:	District of Columbia	Filing Company:	Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN VA WV
TOI/Sub-TOI:	HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO		
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Rate Information

Rate data applies to filing.

Filing Method:	Review & Approval
Rate Change Type:	Decrease
Overall Percentage of Last Rate Revision:	-5.890%
Effective Date of Last Rate Revision:	01/01/2022
Filing Method of Last Filing:	Review & Approval
SERFF Tracking Number of Last Filing:	AETN-132731353

Company Rate Information

Company Name:	Company Rate Change:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN VA WV	Decrease	-7.030%	-7.030%	\$-84,535	49	\$307,037	-3.590%	-13.350%

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TOI/Sub-TOI: HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only
- HMO
Product Name: 2023 DC AHI SG HMO
Project Name/Number: 2023 Exchange - Aetna/HMO

Rate Review Detail

COMPANY:

Company Name: Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN VA WV
HHS Issuer Id: 73987

PRODUCTS:

Product Name	HIOS Product ID	HIOS Submission ID	Number of Covered Lives
DC AHI SG HMO	73987DC004		58

Trend Factors:

FORMS:

New Policy Forms: HI DC SG HIX SOB HMO 14050623, HI DC SG HIX SOB HMO 14050620, HI DC SG HIX SOB HMO 14051070, HI DC SG HIX SOB HMO 14050626, HI DC SG HIX SOB HMO 14051071, HI DC SG HIX SOB HMO 14051069, HI DC SG HIX SOB HMO 14050623

Affected Forms:

Other Affected Forms:

REQUESTED RATE CHANGE INFORMATION:

Change Period: Quarterly
Member Months: 752
Benefit Change: None
Percent Change Requested: Min: -13.35 Max: -3.59 Avg: -7.03

PRIOR RATE:

Total Earned Premium: 391,572.00
Total Incurred Claims: 300,617.00
Annual \$: Min: 366.14 Max: 562.99 Avg: 562.60

REQUESTED RATE:

Projected Earned Premium: 307,037.00
Projected Incurred Claims: 379,315.00
Annual \$: Min: 317.26 Max: 542.78 Avg: 523.05

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Product Name:	2023 DC AHI SG HMO		
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Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		DC AHI SG HMO 2023	HI DC SG HIX SOB HMO 14050623, HI DC SG HIX SOB HMO 14050620, HI DC SG HIX SOB HMO 14051070, HI DC SG HIX SOB HMO 14050626, HI DC SG HIX SOB HMO 14051071, HI DC SG HIX SOB HMO 14051069, HI DC SG HIX SOB HMO 14050621	Revised	Previous State Filing Number: AETN-132731353 Percent Rate Change Request:	DC_SG_73987_Rates_ON_1Q2023_v1.xls, DC_SG_73987_Rates_ON_1Q2023_v1.pdf, DC_SG_73987_Rates_ON_2Q2023_v1.pdf, DC_SG_73987_Rates_ON_3Q2023_v1.pdf, DC_SG_73987_Rates_ON_4Q2023_v1.pdf,

SERFF Tracking #:	AETN-133232225	State Tracking #:		Company Tracking #:	DCAHISG2023
State:	District of Columbia	Filing Company:	Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN VA WV		
TOI/Sub-TOI:	HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO				
Product Name:	2023 DC AHI SG HMO				
Project Name/Number:	2023 Exchange - Aetna/HMO				

Attachment DC_SG_73987_Rates_ON_1Q2023_v1.xls is not a PDF document and cannot be reproduced here.

2023 Rates Table Template v12.0		All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.			
		If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.			
		If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.			
		If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.			
		To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.			
HIOS Issuer ID*		73987			
Rate Effective Date*		1/1/2023			
Rate Expiration Date*		3/31/2023			
Rating Method*		Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*	Individual Tobacco Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan	Required: Enter the rate of an Individual tobacco enrollee on a plan
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	328.07	328.07
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	15	328.07	328.07
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	16	328.07	328.07
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	17	328.07	328.07
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	18	328.07	328.07
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	19	328.07	328.07
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	20	328.07	328.07
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	21	364.69	364.69
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	22	364.69	364.69
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	23	364.69	364.69
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	24	364.69	364.69
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	25	364.69	364.69
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	26	364.69	364.69
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	27	364.69	364.69
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	28	373.22	373.22
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	29	381.24	381.24
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	30	390.78	390.78
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	31	400.81	400.81
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	32	409.84	409.84
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	33	419.37	419.37
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	34	429.40	429.40
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	35	439.43	439.43
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	36	449.47	449.47
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	37	459.50	459.50
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	38	465.02	465.02
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	39	470.54	470.54
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	40	489.10	489.10
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	41	508.16	508.16
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	42	528.22	528.22
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	43	548.79	548.79
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	44	570.36	570.36
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	45	592.43	592.43
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	46	615.51	615.51
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	47	639.59	639.59
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	48	664.67	664.67
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	49	690.75	690.75
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	50	717.84	717.84
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	51	745.93	745.93
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	52	775.03	775.03
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	53	805.13	805.13
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	54	836.73	836.73
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	55	869.34	869.34
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	56	903.45	903.45
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	57	938.56	938.56
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	58	975.18	975.18
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	59	1013.31	1013.31
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	60	1052.94	1052.94
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	61	1094.02	1094.02
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	62	1094.02	1094.02
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	63	1094.02	1094.02
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1093.52	1093.52
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	256.79	256.79
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	15	256.79	256.79
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	16	256.79	256.79
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	17	256.79	256.79
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	18	256.79	256.79
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	19	256.79	256.79
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	20	256.79	256.79
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	21	285.45	285.45
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	22	285.45	285.45
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	23	285.45	285.45
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	24	285.45	285.45
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	25	285.45	285.45
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	26	285.45	285.45
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	27	285.45	285.45
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	28	292.13	292.13
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	29	298.41	298.41
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73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	31	313.72	313.72
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	32	320.79	320.79
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	33	328.25	328.25
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	34	336.10	336.10
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	35	343.96	343.96
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	36	351.81	351.81
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	37	359.66	359.66
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	38	363.98	363.98
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	39	368.30	368.30
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	40	382.83	382.83
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	41	397.75	397.75
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	42	413.45	413.45
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	43	429.55	429.55
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	44	446.44	446.44
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	45	463.71	463.71
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	46	481.77	481.77
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	47	500.62	500.62
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	48	520.25	520.25
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	49	540.67	540.67
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	50	561.87	561.87
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	51	583.86	583.86
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	52	606.63	606.63
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	53	630.19	630.19
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	54	654.93	654.93
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	55	680.45	680.45
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	56	707.15	707.15
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	57	734.64	734.64
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	58	763.30	763.30
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	59	793.14	793.14
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	60	824.16	824.16
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	61	856.32	856.32
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	62	856.32	856.32
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	63	856.32	856.32
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	855.92	855.92
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	317.24	317.24
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	15	317.24	317.24
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	16	317.24	317.24
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	17	317.24	317.24
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	18	317.24	317.24
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	19	317.24	317.24
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	20	317.24	317.24
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	21	352.65	352.65
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	22	352.65	352.65
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	23	352.65	352.65
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	24	352.65	352.65

	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	25	352.65	352.65
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	26	352.65	352.65
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	27	352.65	352.65
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	28	360.90	360.90
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	29	368.66	368.66
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	30	377.88	377.88
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	31	387.58	387.58
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	32	396.31	396.31
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	33	405.53	405.53
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	34	415.23	415.23
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	35	424.93	424.93
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	36	434.63	434.63
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	37	444.33	444.33
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	38	449.67	449.67
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	39	455.01	455.01
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	40	472.95	472.95
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	41	491.39	491.39
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	42	510.79	510.79
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	43	530.68	530.68
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	44	551.54	551.54
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	45	572.88	572.88
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	46	595.19	595.19
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	47	618.48	618.48
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	48	642.73	642.73
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	49	667.96	667.96
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	50	694.15	694.15
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	51	721.32	721.32
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	52	749.45	749.45
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	53	778.55	778.55
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	54	809.11	809.11
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	55	840.64	840.64
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	56	873.63	873.63
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	57	907.59	907.59
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	58	943.00	943.00
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	59	979.86	979.86
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	60	1018.18	1018.18
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	61	1057.91	1057.91
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	62	1057.91	1057.91
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	63	1057.91	1057.91
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1057.43	1057.43
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	250.19	250.19
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	15	250.19	250.19
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	16	250.19	250.19
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	17	250.19	250.19
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	18	250.19	250.19
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	19	250.19	250.19
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	20	250.19	250.19
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	21	278.12	278.12
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	22	278.12	278.12
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	23	278.12	278.12
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	24	278.12	278.12
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	25	278.12	278.12
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	26	278.12	278.12
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	27	278.12	278.12
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	28	284.62	284.62
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	29	290.75	290.75
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	30	298.01	298.01
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	31	305.67	305.67
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	32	312.55	312.55
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	33	319.82	319.82
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	34	327.47	327.47
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	35	335.12	335.12
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	36	342.77	342.77
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	37	350.43	350.43
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	38	354.63	354.63
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	39	358.84	358.84
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	40	373.00	373.00
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	41	387.53	387.53
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	42	402.84	402.84
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	43	418.52	418.52
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	44	434.97	434.97
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	45	451.80	451.80
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	46	469.40	469.40
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	47	487.76	487.76
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	48	506.89	506.89
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	49	526.79	526.79
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	50	547.44	547.44
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	51	568.87	568.87
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	52	591.06	591.06
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	53	614.01	614.01
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	54	638.11	638.11
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	55	662.98	662.98
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	56	688.99	688.99
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	57	715.77	715.77
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	58	743.70	743.70
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	59	772.77	772.77
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	60	802.99	802.99
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	61	834.33	834.33
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	62	834.33	834.33
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	63	834.33	834.33
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	833.94	833.94
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	320.71	320.71
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	15	320.71	320.71
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	16	320.71	320.71
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	17	320.71	320.71
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	18	320.71	320.71
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	19	320.71	320.71
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	20	320.71	320.71
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	21	356.51	356.51
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	22	356.51	356.51
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	23	356.51	356.51
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	24	356.51	356.51
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	25	356.51	356.51
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	26	356.51	356.51
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	27	356.51	356.51
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	28	364.85	364.85
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	29	372.69	372.69
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	30	382.01	382.01
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	31	391.82	391.82
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	32	400.64	400.64
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	33	409.96	409.96

73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	34	419.77	419.77
	Rating Area 1	Tobacco User/Non-Tobacco User	35	429.58	429.58
	Rating Area 1	Tobacco User/Non-Tobacco User	36	439.38	439.38
	Rating Area 1	Tobacco User/Non-Tobacco User	37	449.19	449.19
	Rating Area 1	Tobacco User/Non-Tobacco User	38	454.59	454.59
	Rating Area 1	Tobacco User/Non-Tobacco User	39	459.98	459.98
	Rating Area 1	Tobacco User/Non-Tobacco User	40	478.12	478.12
	Rating Area 1	Tobacco User/Non-Tobacco User	41	496.76	496.76
	Rating Area 1	Tobacco User/Non-Tobacco User	42	516.37	516.37
	Rating Area 1	Tobacco User/Non-Tobacco User	43	536.48	536.48
	Rating Area 1	Tobacco User/Non-Tobacco User	44	557.57	557.57
	Rating Area 1	Tobacco User/Non-Tobacco User	45	579.14	579.14
	Rating Area 1	Tobacco User/Non-Tobacco User	46	601.70	601.70
	Rating Area 1	Tobacco User/Non-Tobacco User	47	625.24	625.24
	Rating Area 1	Tobacco User/Non-Tobacco User	48	649.76	649.76
	Rating Area 1	Tobacco User/Non-Tobacco User	49	675.26	675.26
	Rating Area 1	Tobacco User/Non-Tobacco User	50	701.74	701.74
	Rating Area 1	Tobacco User/Non-Tobacco User	51	729.20	729.20
	Rating Area 1	Tobacco User/Non-Tobacco User	52	757.64	757.64
	Rating Area 1	Tobacco User/Non-Tobacco User	53	787.07	787.07
	Rating Area 1	Tobacco User/Non-Tobacco User	54	817.96	817.96
	Rating Area 1	Tobacco User/Non-Tobacco User	55	849.83	849.83
	Rating Area 1	Tobacco User/Non-Tobacco User	56	883.18	883.18
	Rating Area 1	Tobacco User/Non-Tobacco User	57	917.51	917.51
	Rating Area 1	Tobacco User/Non-Tobacco User	58	953.31	953.31
	Rating Area 1	Tobacco User/Non-Tobacco User	59	990.57	990.57
	Rating Area 1	Tobacco User/Non-Tobacco User	60	1029.31	1029.31
	Rating Area 1	Tobacco User/Non-Tobacco User	61	1069.48	1069.48
	Rating Area 1	Tobacco User/Non-Tobacco User	62	1069.48	1069.48
	Rating Area 1	Tobacco User/Non-Tobacco User	63	1069.48	1069.48
	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1068.99	1068.99
73987DC0040060	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	198.97	198.97
73987DC0040060	Rating Area 1	Tobacco User/Non-Tobacco User	15	198.97	198.97
	Rating Area 1	Tobacco User/Non-Tobacco User	16	198.97	198.97
	Rating Area 1	Tobacco User/Non-Tobacco User	17	198.97	198.97
	Rating Area 1	Tobacco User/Non-Tobacco User	18	198.97	198.97
	Rating Area 1	Tobacco User/Non-Tobacco User	19	198.97	198.97
	Rating Area 1	Tobacco User/Non-Tobacco User	20	198.97	198.97
	Rating Area 1	Tobacco User/Non-Tobacco User	21	221.18	221.18
	Rating Area 1	Tobacco User/Non-Tobacco User	22	221.18	221.18
	Rating Area 1	Tobacco User/Non-Tobacco User	23	221.18	221.18
	Rating Area 1	Tobacco User/Non-Tobacco User	24	221.18	221.18
	Rating Area 1	Tobacco User/Non-Tobacco User	25	221.18	221.18
	Rating Area 1	Tobacco User/Non-Tobacco User	26	221.18	221.18
	Rating Area 1	Tobacco User/Non-Tobacco User	27	221.18	221.18
	Rating Area 1	Tobacco User/Non-Tobacco User	28	226.35	226.35
	Rating Area 1	Tobacco User/Non-Tobacco User	29	231.22	231.22
	Rating Area 1	Tobacco User/Non-Tobacco User	30	237.00	237.00
	Rating Area 1	Tobacco User/Non-Tobacco User	31	243.08	243.08
	Rating Area 1	Tobacco User/Non-Tobacco User	32	248.56	248.56
	Rating Area 1	Tobacco User/Non-Tobacco User	33	254.34	254.34
	Rating Area 1	Tobacco User/Non-Tobacco User	34	260.42	260.42
	Rating Area 1	Tobacco User/Non-Tobacco User	35	266.51	266.51
	Rating Area 1	Tobacco User/Non-Tobacco User	36	272.59	272.59
	Rating Area 1	Tobacco User/Non-Tobacco User	37	278.68	278.68
	Rating Area 1	Tobacco User/Non-Tobacco User	38	282.02	282.02
	Rating Area 1	Tobacco User/Non-Tobacco User	39	285.37	285.37
	Rating Area 1	Tobacco User/Non-Tobacco User	40	296.63	296.63
	Rating Area 1	Tobacco User/Non-Tobacco User	41	308.19	308.19
	Rating Area 1	Tobacco User/Non-Tobacco User	42	320.36	320.36
	Rating Area 1	Tobacco User/Non-Tobacco User	43	332.83	332.83
	Rating Area 1	Tobacco User/Non-Tobacco User	44	345.91	345.91
	Rating Area 1	Tobacco User/Non-Tobacco User	45	359.30	359.30
	Rating Area 1	Tobacco User/Non-Tobacco User	46	373.29	373.29
	Rating Area 1	Tobacco User/Non-Tobacco User	47	387.90	387.90
	Rating Area 1	Tobacco User/Non-Tobacco User	48	403.11	403.11

73987DC0040060	Rating Area 1		Tobacco User/Non-Tobacco User	49	418.93	418.93
	Rating Area 1		Tobacco User/Non-Tobacco User	50	435.36	435.36
	Rating Area 1		Tobacco User/Non-Tobacco User	51	452.39	452.39
	Rating Area 1		Tobacco User/Non-Tobacco User	52	470.04	470.04
	Rating Area 1		Tobacco User/Non-Tobacco User	53	488.29	488.29
	Rating Area 1		Tobacco User/Non-Tobacco User	54	507.46	507.46
	Rating Area 1		Tobacco User/Non-Tobacco User	55	527.24	527.24
	Rating Area 1		Tobacco User/Non-Tobacco User	56	547.92	547.92
	Rating Area 1		Tobacco User/Non-Tobacco User	57	569.22	569.22
	Rating Area 1		Tobacco User/Non-Tobacco User	58	591.43	591.43
	Rating Area 1		Tobacco User/Non-Tobacco User	59	614.55	614.55
	Rating Area 1		Tobacco User/Non-Tobacco User	60	638.58	638.58
	Rating Area 1		Tobacco User/Non-Tobacco User	61	663.50	663.50
	Rating Area 1		Tobacco User/Non-Tobacco User	62	663.50	663.50
	Rating Area 1		Tobacco User/Non-Tobacco User	63	663.50	663.50
	Rating Area 1		Tobacco User/Non-Tobacco User	64 and over	663.20	663.20
73987DC0040061	Rating Area 1		Tobacco User/Non-Tobacco User	0-14	340.41	340.41
73987DC0040061	Rating Area 1		Tobacco User/Non-Tobacco User	15	340.41	340.41
	Rating Area 1		Tobacco User/Non-Tobacco User	16	340.41	340.41
	Rating Area 1		Tobacco User/Non-Tobacco User	17	340.41	340.41
	Rating Area 1		Tobacco User/Non-Tobacco User	18	340.41	340.41
	Rating Area 1		Tobacco User/Non-Tobacco User	19	340.41	340.41
	Rating Area 1		Tobacco User/Non-Tobacco User	20	340.41	340.41
	Rating Area 1		Tobacco User/Non-Tobacco User	21	378.41	378.41
	Rating Area 1		Tobacco User/Non-Tobacco User	22	378.41	378.41
	Rating Area 1		Tobacco User/Non-Tobacco User	23	378.41	378.41
	Rating Area 1		Tobacco User/Non-Tobacco User	24	378.41	378.41
	Rating Area 1		Tobacco User/Non-Tobacco User	25	378.41	378.41
	Rating Area 1		Tobacco User/Non-Tobacco User	26	378.41	378.41
	Rating Area 1		Tobacco User/Non-Tobacco User	27	378.41	378.41
	Rating Area 1		Tobacco User/Non-Tobacco User	28	387.25	387.25
	Rating Area 1		Tobacco User/Non-Tobacco User	29	395.58	395.58
	Rating Area 1		Tobacco User/Non-Tobacco User	30	405.47	405.47
	Rating Area 1		Tobacco User/Non-Tobacco User	31	415.88	415.88
	Rating Area 1		Tobacco User/Non-Tobacco User	32	425.25	425.25
	Rating Area 1		Tobacco User/Non-Tobacco User	33	435.14	435.14
	Rating Area 1		Tobacco User/Non-Tobacco User	34	445.55	445.55
	Rating Area 1		Tobacco User/Non-Tobacco User	35	455.96	455.96
	Rating Area 1		Tobacco User/Non-Tobacco User	36	466.37	466.37
	Rating Area 1		Tobacco User/Non-Tobacco User	37	476.78	476.78
	Rating Area 1		Tobacco User/Non-Tobacco User	38	482.51	482.51
	Rating Area 1		Tobacco User/Non-Tobacco User	39	488.23	488.23
	Rating Area 1		Tobacco User/Non-Tobacco User	40	507.49	507.49
	Rating Area 1		Tobacco User/Non-Tobacco User	41	527.27	527.27
	Rating Area 1		Tobacco User/Non-Tobacco User	42	548.09	548.09
	Rating Area 1		Tobacco User/Non-Tobacco User	43	569.43	569.43
	Rating Area 1		Tobacco User/Non-Tobacco User	44	591.81	591.81
	Rating Area 1		Tobacco User/Non-Tobacco User	45	614.71	614.71
	Rating Area 1		Tobacco User/Non-Tobacco User	46	638.66	638.66
	Rating Area 1		Tobacco User/Non-Tobacco User	47	663.64	663.64
	Rating Area 1		Tobacco User/Non-Tobacco User	48	689.67	689.67
	Rating Area 1		Tobacco User/Non-Tobacco User	49	716.73	716.73
	Rating Area 1		Tobacco User/Non-Tobacco User	50	744.84	744.84
	Rating Area 1		Tobacco User/Non-Tobacco User	51	773.99	773.99
	Rating Area 1		Tobacco User/Non-Tobacco User	52	804.18	804.18
	Rating Area 1		Tobacco User/Non-Tobacco User	53	835.41	835.41
	Rating Area 1		Tobacco User/Non-Tobacco User	54	868.20	868.20
	Rating Area 1		Tobacco User/Non-Tobacco User	55	902.03	902.03
	Rating Area 1		Tobacco User/Non-Tobacco User	56	937.43	937.43
	Rating Area 1		Tobacco User/Non-Tobacco User	57	973.86	973.86
	Rating Area 1		Tobacco User/Non-Tobacco User	58	1011.86	1011.86
	Rating Area 1		Tobacco User/Non-Tobacco User	59	1051.42	1051.42
	Rating Area 1		Tobacco User/Non-Tobacco User	60	1092.54	1092.54
	Rating Area 1		Tobacco User/Non-Tobacco User	61	1135.17	1135.17
	Rating Area 1		Tobacco User/Non-Tobacco User	62	1135.17	1135.17
	Rating Area 1		Tobacco User/Non-Tobacco User	63	1135.17	1135.17

73987DC0040061 Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1134.65	1134.65
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2023 Rates Table Template v12.0		All fields with an asterisk (<i>*</i>) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.			
		If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.			
		If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.			
		If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.			
		To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.			
HIOS Issuer ID*		73987			
Rate Effective Date*		4/1/2023			
Rate Expiration Date*		6/30/2023			
Rating Method*		Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*	Individual Tobacco Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan	Required: Enter the rate of an Individual tobacco enrollee on a plan
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	336.42	336.42
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	15	336.42	336.42
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	16	336.42	336.42
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	17	336.42	336.42
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	18	336.42	336.42
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	19	336.42	336.42
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	20	336.42	336.42
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	21	373.97	373.97
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	22	373.97	373.97
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	23	373.97	373.97
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	24	373.97	373.97
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	25	373.97	373.97
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	26	373.97	373.97
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	27	373.97	373.97
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	28	382.71	382.71
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	29	390.94	390.94
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	30	400.72	400.72
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	31	411.00	411.00
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	32	420.26	420.26
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	33	430.04	430.04
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	34	440.33	440.33
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	35	450.61	450.61
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	36	460.90	460.90
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	37	471.19	471.19
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	38	476.85	476.85
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	39	482.51	482.51
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	40	501.54	501.54
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	41	521.09	521.09
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	42	541.66	541.66
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	43	562.75	562.75
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	44	584.87	584.87
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	45	607.50	607.50
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	46	631.17	631.17
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	47	655.86	655.86
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	48	681.58	681.58
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	49	708.33	708.33
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	50	736.10	736.10
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	51	764.91	764.91
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	52	794.75	794.75
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	53	825.61	825.61
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	54	858.02	858.02
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	55	891.45	891.45
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	56	926.43	926.43
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	57	962.44	962.44
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	58	999.99	999.99
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	59	1039.09	1039.09
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	60	1079.72	1079.72
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	61	1121.85	1121.85
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	62	1121.85	1121.85
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	63	1121.85	1121.85
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1121.34	1121.34
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	263.32	263.32
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	15	263.32	263.32
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	16	263.32	263.32
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	17	263.32	263.32
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	18	263.32	263.32
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	19	263.32	263.32
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	20	263.32	263.32
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	21	292.71	292.71
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	22	292.71	292.71
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	23	292.71	292.71
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	24	292.71	292.71
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	25	292.71	292.71
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	26	292.71	292.71
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	27	292.71	292.71
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	28	299.56	299.56
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	29	306.00	306.00
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	30	313.65	313.65
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	31	321.70	321.70
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	32	328.95	328.95
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	33	336.60	336.60
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	34	344.65	344.65
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	35	352.71	352.71
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	36	360.76	360.76
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	37	368.81	368.81
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	38	373.24	373.24
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	39	377.67	377.67
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	40	392.57	392.57
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	41	407.87	407.87
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	42	423.97	423.97
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	43	440.48	440.48
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	44	457.79	457.79
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	45	475.51	475.51
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	46	494.03	494.03
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	47	513.36	513.36
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	48	533.49	533.49
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	49	554.42	554.42
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	50	576.17	576.17
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	51	598.71	598.71
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	52	622.07	622.07
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	53	646.22	646.22
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	54	671.59	671.59
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	55	697.76	697.76
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	56	725.14	725.14
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	57	753.32	753.32
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	58	782.72	782.72
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	59	813.32	813.32
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	60	845.13	845.13
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	61	878.10	878.10
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	62	878.10	878.10
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	63	878.10	878.10
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	877.70	877.70
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	325.31	325.31
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	15	325.31	325.31
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	16	325.31	325.31
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	17	325.31	325.31
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	18	325.31	325.31
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	19	325.31	325.31
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	20	325.31	325.31
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	21	361.63	361.63
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	22	361.63	361.63
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	23	361.63	361.63
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	24	361.63	361.63

	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	25	361.63	361.63
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	26	361.63	361.63
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	27	361.63	361.63
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	28	370.08	370.08
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	29	378.04	378.04
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	30	387.49	387.49
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	31	397.44	397.44
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	32	406.39	406.39
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	33	415.84	415.84
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	34	425.79	425.79
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	35	435.74	435.74
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	36	445.69	445.69
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	37	455.64	455.64
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	38	461.11	461.11
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	39	466.58	466.58
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	40	484.99	484.99
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	41	503.89	503.89
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	42	523.78	523.78
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	43	544.18	544.18
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	44	565.57	565.57
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	45	587.45	587.45
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	46	610.34	610.34
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	47	634.21	634.21
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	48	659.08	659.08
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	49	684.95	684.95
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	50	711.81	711.81
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	51	739.67	739.67
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	52	768.52	768.52
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	53	798.36	798.36
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	54	829.70	829.70
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	55	862.03	862.03
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	56	895.86	895.86
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	57	930.68	930.68
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	58	966.99	966.99
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	59	1004.79	1004.79
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	60	1044.09	1044.09
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	61	1084.83	1084.83
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	62	1084.83	1084.83
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	63	1084.83	1084.83
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1084.33	1084.33
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	256.56	256.56
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	15	256.56	256.56
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	16	256.56	256.56
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	17	256.56	256.56
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	18	256.56	256.56
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	19	256.56	256.56
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	20	256.56	256.56
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	21	285.20	285.20
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	22	285.20	285.20
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	23	285.20	285.20
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	24	285.20	285.20
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	25	285.20	285.20
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	26	285.20	285.20
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	27	285.20	285.20
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	28	291.87	291.87
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	29	298.14	298.14
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	30	305.60	305.60
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	31	313.44	313.44
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	32	320.50	320.50
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	33	327.96	327.96
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	34	335.80	335.80
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	35	343.65	343.65
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	36	351.49	351.49
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	37	359.34	359.34
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	38	363.66	363.66
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	39	367.97	367.97
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	40	382.49	382.49
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	41	397.39	397.39
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	42	413.08	413.08
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	43	429.17	429.17
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	44	446.04	446.04
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	45	463.30	463.30
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	46	481.34	481.34
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	47	500.17	500.17
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	48	519.79	519.79
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	49	540.19	540.19
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	50	561.37	561.37
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	51	583.34	583.34
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	52	606.09	606.09
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	53	629.63	629.63
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	54	654.34	654.34
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	55	679.84	679.84
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	56	706.52	706.52
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	57	733.98	733.98
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	58	762.62	762.62
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	59	792.43	792.43
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	60	823.42	823.42
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	61	855.55	855.55
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	62	855.55	855.55
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	63	855.55	855.55
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	855.16	855.16
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	328.87	328.87
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	15	328.87	328.87
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	16	328.87	328.87
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	17	328.87	328.87
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	18	328.87	328.87
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	19	328.87	328.87
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	20	328.87	328.87
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	21	365.58	365.58
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	22	365.58	365.58
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	23	365.58	365.58
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	24	365.58	365.58
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	25	365.58	365.58
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	26	365.58	365.58
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	27	365.58	365.58
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	28	374.13	374.13
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	29	382.17	382.17
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	30	391.73	391.73
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	31	401.78	401.78
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	32	410.84	410.84
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	33	420.39	420.39

73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	34	430.45	430.45
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	35	440.50	440.50
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	36	450.56	450.56
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	37	460.62	460.62
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	38	466.15	466.15
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	39	471.68	471.68
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	40	490.29	490.29
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	41	509.40	509.40
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	42	529.51	529.51
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	43	550.13	550.13
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	44	571.75	571.75
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	45	593.88	593.88
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	46	617.01	617.01
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	47	641.15	641.15
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	48	666.29	666.29
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	49	692.44	692.44
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	50	719.59	719.59
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	51	747.75	747.75
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	52	776.92	776.92
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	53	807.09	807.09
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	54	838.77	838.77
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	55	871.45	871.45
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	56	905.65	905.65
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	57	940.85	940.85
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	58	977.56	977.56
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	59	1015.77	1015.77
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	60	1055.50	1055.50
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	61	1096.68	1096.68
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	62	1096.68	1096.68
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	63	1096.68	1096.68
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	64 and over	1096.18	1096.18
73987DC0040060	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	204.03	204.03
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	15	204.03	204.03
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	16	204.03	204.03
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	17	204.03	204.03
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	18	204.03	204.03
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	19	204.03	204.03
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	20	204.03	204.03
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	21	226.80	226.80
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	22	226.80	226.80
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	23	226.80	226.80
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	24	226.80	226.80
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	25	226.80	226.80
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	26	226.80	226.80
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	27	226.80	226.80
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	28	232.11	232.11
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	29	237.10	237.10
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	30	243.03	243.03
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	31	249.27	249.27
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	32	254.88	254.88
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	33	260.81	260.81
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	34	267.05	267.05
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	35	273.29	273.29
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	36	279.53	279.53
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	37	285.77	285.77
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	38	289.20	289.20
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	39	292.63	292.63
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	40	304.17	304.17
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	41	316.03	316.03
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	42	328.51	328.51
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	43	341.30	341.30
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	44	354.71	354.71
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	45	368.44	368.44
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	46	382.79	382.79
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	47	397.76	397.76
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	48	413.36	413.36

73987DC0040060	Rating Area 1		Tobacco User/Non-Tobacco User	49	429.59	429.59
	Rating Area 1		Tobacco User/Non-Tobacco User	50	446.43	446.43
	Rating Area 1		Tobacco User/Non-Tobacco User	51	463.90	463.90
	Rating Area 1		Tobacco User/Non-Tobacco User	52	482.00	482.00
	Rating Area 1		Tobacco User/Non-Tobacco User	53	500.72	500.72
	Rating Area 1		Tobacco User/Non-Tobacco User	54	520.37	520.37
	Rating Area 1		Tobacco User/Non-Tobacco User	55	540.65	540.65
	Rating Area 1		Tobacco User/Non-Tobacco User	56	561.86	561.86
	Rating Area 1		Tobacco User/Non-Tobacco User	57	583.70	583.70
	Rating Area 1		Tobacco User/Non-Tobacco User	58	606.47	606.47
	Rating Area 1		Tobacco User/Non-Tobacco User	59	630.18	630.18
	Rating Area 1		Tobacco User/Non-Tobacco User	60	654.83	654.83
	Rating Area 1		Tobacco User/Non-Tobacco User	61	680.38	680.38
	Rating Area 1		Tobacco User/Non-Tobacco User	62	680.38	680.38
	Rating Area 1		Tobacco User/Non-Tobacco User	63	680.38	680.38
	Rating Area 1		Tobacco User/Non-Tobacco User	64 and over	680.07	680.07
73987DC0040061	Rating Area 1		Tobacco User/Non-Tobacco User	0-14	349.07	349.07
73987DC0040061	Rating Area 1		Tobacco User/Non-Tobacco User	15	349.07	349.07
	Rating Area 1		Tobacco User/Non-Tobacco User	16	349.07	349.07
	Rating Area 1		Tobacco User/Non-Tobacco User	17	349.07	349.07
	Rating Area 1		Tobacco User/Non-Tobacco User	18	349.07	349.07
	Rating Area 1		Tobacco User/Non-Tobacco User	19	349.07	349.07
	Rating Area 1		Tobacco User/Non-Tobacco User	20	349.07	349.07
	Rating Area 1		Tobacco User/Non-Tobacco User	21	388.03	388.03
	Rating Area 1		Tobacco User/Non-Tobacco User	22	388.03	388.03
	Rating Area 1		Tobacco User/Non-Tobacco User	23	388.03	388.03
	Rating Area 1		Tobacco User/Non-Tobacco User	24	388.03	388.03
	Rating Area 1		Tobacco User/Non-Tobacco User	25	388.03	388.03
	Rating Area 1		Tobacco User/Non-Tobacco User	26	388.03	388.03
	Rating Area 1		Tobacco User/Non-Tobacco User	27	388.03	388.03
	Rating Area 1		Tobacco User/Non-Tobacco User	28	397.11	397.11
	Rating Area 1		Tobacco User/Non-Tobacco User	29	405.65	405.65
	Rating Area 1		Tobacco User/Non-Tobacco User	30	415.79	415.79
	Rating Area 1		Tobacco User/Non-Tobacco User	31	426.46	426.46
	Rating Area 1		Tobacco User/Non-Tobacco User	32	436.07	436.07
	Rating Area 1		Tobacco User/Non-Tobacco User	33	446.21	446.21
	Rating Area 1		Tobacco User/Non-Tobacco User	34	456.89	456.89
	Rating Area 1		Tobacco User/Non-Tobacco User	35	467.56	467.56
	Rating Area 1		Tobacco User/Non-Tobacco User	36	478.24	478.24
	Rating Area 1		Tobacco User/Non-Tobacco User	37	488.91	488.91
	Rating Area 1		Tobacco User/Non-Tobacco User	38	494.78	494.78
	Rating Area 1		Tobacco User/Non-Tobacco User	39	500.65	500.65
	Rating Area 1		Tobacco User/Non-Tobacco User	40	520.40	520.40
	Rating Area 1		Tobacco User/Non-Tobacco User	41	540.68	540.68
	Rating Area 1		Tobacco User/Non-Tobacco User	42	562.03	562.03
	Rating Area 1		Tobacco User/Non-Tobacco User	43	583.92	583.92
	Rating Area 1		Tobacco User/Non-Tobacco User	44	606.87	606.87
	Rating Area 1		Tobacco User/Non-Tobacco User	45	630.35	630.35
	Rating Area 1		Tobacco User/Non-Tobacco User	46	654.91	654.91
	Rating Area 1		Tobacco User/Non-Tobacco User	47	680.53	680.53
	Rating Area 1		Tobacco User/Non-Tobacco User	48	707.21	707.21
	Rating Area 1		Tobacco User/Non-Tobacco User	49	734.97	734.97
	Rating Area 1		Tobacco User/Non-Tobacco User	50	763.79	763.79
	Rating Area 1		Tobacco User/Non-Tobacco User	51	793.68	793.68
	Rating Area 1		Tobacco User/Non-Tobacco User	52	824.64	824.64
	Rating Area 1		Tobacco User/Non-Tobacco User	53	856.66	856.66
	Rating Area 1		Tobacco User/Non-Tobacco User	54	890.29	890.29
	Rating Area 1		Tobacco User/Non-Tobacco User	55	924.98	924.98
	Rating Area 1		Tobacco User/Non-Tobacco User	56	961.28	961.28
	Rating Area 1		Tobacco User/Non-Tobacco User	57	998.64	998.64
	Rating Area 1		Tobacco User/Non-Tobacco User	58	1037.60	1037.60
	Rating Area 1		Tobacco User/Non-Tobacco User	59	1078.17	1078.17
	Rating Area 1		Tobacco User/Non-Tobacco User	60	1120.33	1120.33
	Rating Area 1		Tobacco User/Non-Tobacco User	61	1164.04	1164.04
	Rating Area 1		Tobacco User/Non-Tobacco User	62	1164.04	1164.04
	Rating Area 1		Tobacco User/Non-Tobacco User	63	1164.04	1164.04

73987DC0040061 Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1163.51	1163.51
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2023 Rates Table Template v12.0		All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.			
		If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.			
		If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.			
		If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.			
		To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.			
HIOS Issuer ID*		73987			
Rate Effective Date*		7/1/2023			
Rate Expiration Date*		9/30/2023			
Rating Method*		Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*	Individual Tobacco Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan	Required: Enter the rate of an Individual tobacco enrollee on a plan
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	344.98	344.98
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	15	344.98	344.98
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	16	344.98	344.98
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	17	344.98	344.98
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	18	344.98	344.98
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	19	344.98	344.98
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	20	344.98	344.98
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	21	383.48	383.48
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	22	383.48	383.48
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	23	383.48	383.48
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	24	383.48	383.48
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	25	383.48	383.48
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	26	383.48	383.48
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	27	383.48	383.48
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	28	392.45	392.45
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	29	400.89	400.89
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	30	410.91	410.91
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	31	421.46	421.46
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	32	430.96	430.96
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	33	440.98	440.98
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	34	451.53	451.53
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	35	462.08	462.08
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	36	472.63	472.63
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	37	483.18	483.18
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	38	488.98	488.98
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	39	494.78	494.78
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	40	514.30	514.30
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	41	534.34	534.34
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	42	555.44	555.44
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	43	577.07	577.07
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	44	599.75	599.75
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	45	622.96	622.96
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	46	647.22	647.22
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	47	672.54	672.54
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	48	698.92	698.92
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	49	726.35	726.35
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	50	754.83	754.83
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	51	784.37	784.37
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	52	814.96	814.96
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	53	846.61	846.61
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	54	879.85	879.85
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	55	914.13	914.13
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	56	950.00	950.00
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	57	986.93	986.93
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	58	1025.43	1025.43
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	59	1065.52	1065.52
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	60	1107.19	1107.19
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	61	1150.39	1150.39
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	62	1150.39	1150.39
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	63	1150.39	1150.39
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1149.87	1149.87
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	270.02	270.02
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	15	270.02	270.02
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	16	270.02	270.02
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	17	270.02	270.02
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	18	270.02	270.02
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	19	270.02	270.02
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	20	270.02	270.02
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	21	300.16	300.16
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	22	300.16	300.16
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	23	300.16	300.16
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	24	300.16	300.16
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	25	300.16	300.16
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	26	300.16	300.16
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	27	300.16	300.16
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	28	307.18	307.18
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	29	313.79	313.79
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	30	321.63	321.63
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	31	329.89	329.89
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	32	337.32	337.32
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	33	345.16	345.16
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	34	353.42	353.42
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	35	361.68	361.68
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	36	369.94	369.94
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	37	378.19	378.19
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	38	382.74	382.74
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	39	387.28	387.28
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	40	402.55	402.55
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	41	418.24	418.24
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	42	434.76	434.76
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	43	451.69	451.69
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	44	469.44	469.44
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	45	487.61	487.61
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	46	506.60	506.60
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	47	526.42	526.42
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	48	547.06	547.06
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	49	568.53	568.53
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	50	590.82	590.82
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	51	613.95	613.95
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	52	637.89	637.89
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	53	662.67	662.67
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	54	688.68	688.68
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	55	715.51	715.51
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	56	743.59	743.59
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	57	772.49	772.49
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	58	802.63	802.63
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	59	834.01	834.01
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	60	866.63	866.63
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	61	900.44	900.44
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	62	900.44	900.44
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	63	900.44	900.44
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	900.03	900.03
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	333.59	333.59
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	15	333.59	333.59
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	16	333.59	333.59
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	17	333.59	333.59
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	18	333.59	333.59
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	19	333.59	333.59
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	20	333.59	333.59
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	21	370.83	370.83
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	22	370.83	370.83
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	23	370.83	370.83
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	24	370.83	370.83

	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	25	370.83	370.83
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	26	370.83	370.83
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	27	370.83	370.83
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	28	379.50	379.50
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	29	387.66	387.66
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	30	397.35	397.35
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	31	407.55	407.55
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	32	416.73	416.73
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	33	426.42	426.42
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	34	436.63	436.63
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	35	446.83	446.83
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	36	457.03	457.03
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	37	467.23	467.23
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	38	472.84	472.84
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	39	478.45	478.45
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	40	497.32	497.32
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	41	516.71	516.71
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	42	537.11	537.11
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	43	558.02	558.02
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	44	579.96	579.96
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	45	602.40	602.40
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	46	625.86	625.86
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	47	650.35	650.35
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	48	675.85	675.85
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	49	702.37	702.37
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	50	729.92	729.92
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	51	758.48	758.48
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	52	788.07	788.07
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	53	818.67	818.67
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	54	850.81	850.81
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	55	883.96	883.96
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	56	918.65	918.65
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	57	954.35	954.35
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	58	991.59	991.59
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	59	1030.35	1030.35
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	60	1070.65	1070.65
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	61	1112.42	1112.42
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	62	1112.42	1112.42
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	63	1112.42	1112.42
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1111.91	1111.91
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	263.09	263.09
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	15	263.09	263.09
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	16	263.09	263.09
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	17	263.09	263.09
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	18	263.09	263.09
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	19	263.09	263.09
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	20	263.09	263.09
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	21	292.45	292.45
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	22	292.45	292.45
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	23	292.45	292.45
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	24	292.45	292.45
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	25	292.45	292.45
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	26	292.45	292.45
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	27	292.45	292.45
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	28	299.29	299.29
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	29	305.73	305.73
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	30	313.37	313.37
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	31	321.42	321.42
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	32	328.66	328.66
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	33	336.30	336.30
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	34	344.35	344.35
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	35	352.39	352.39
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	36	360.44	360.44
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	37	368.48	368.48
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	38	372.91	372.91
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	39	377.33	377.33
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	40	392.22	392.22
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	41	407.50	407.50
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	42	423.59	423.59
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	43	440.09	440.09
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	44	457.38	457.38
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	45	475.08	475.08
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	46	493.59	493.59
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	47	512.90	512.90
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	48	533.01	533.01
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	49	553.93	553.93
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	50	575.65	575.65
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	51	598.18	598.18
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	52	621.51	621.51
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	53	645.65	645.65
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	54	670.99	670.99
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	55	697.14	697.14
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	56	724.49	724.49
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	57	752.65	752.65
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	58	782.02	782.02
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	59	812.59	812.59
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	60	844.37	844.37
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	61	877.32	877.32
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	62	877.32	877.32
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	63	877.32	877.32
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	876.91	876.91
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	337.24	337.24
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	15	337.24	337.24
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	16	337.24	337.24
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	17	337.24	337.24
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	18	337.24	337.24
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	19	337.24	337.24
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	20	337.24	337.24
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	21	374.88	374.88
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	22	374.88	374.88
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	23	374.88	374.88
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	24	374.88	374.88
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	25	374.88	374.88
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	26	374.88	374.88
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	27	374.88	374.88
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	28	383.65	383.65
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	29	391.90	391.90
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	30	401.69	401.69
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	31	412.01	412.01
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	32	421.29	421.29
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	33	431.09	431.09

73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	34	441.40	441.40
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	35	451.71	451.71
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	36	462.02	462.02
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	37	472.34	472.34
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	38	478.01	478.01
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	39	483.68	483.68
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	40	502.76	502.76
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	41	522.36	522.36
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	42	542.98	542.98
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	43	564.12	564.12
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	44	586.30	586.30
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	45	608.98	608.98
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	46	632.70	632.70
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	47	657.46	657.46
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	48	683.24	683.24
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	49	710.05	710.05
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	50	737.90	737.90
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	51	766.77	766.77
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	52	796.68	796.68
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	53	827.62	827.62
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	54	860.11	860.11
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	55	893.62	893.62
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	56	928.69	928.69
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	57	964.78	964.78
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	58	1002.43	1002.43
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	59	1041.62	1041.62
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	60	1082.35	1082.35
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	61	1124.59	1124.59
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	62	1124.59	1124.59
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	63	1124.59	1124.59
73987DC0040058 Rating Area 1		Tobacco User/Non-Tobacco User	64 and over	1124.07	1124.07
73987DC0040060	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	209.22	209.22
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	15	209.22	209.22
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	16	209.22	209.22
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	17	209.22	209.22
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	18	209.22	209.22
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	19	209.22	209.22
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	20	209.22	209.22
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	21	232.57	232.57
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	22	232.57	232.57
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	23	232.57	232.57
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	24	232.57	232.57
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	25	232.57	232.57
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	26	232.57	232.57
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	27	232.57	232.57
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	28	238.01	238.01
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	29	243.13	243.13
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	30	249.21	249.21
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	31	255.61	255.61
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	32	261.37	261.37
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	33	267.44	267.44
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	34	273.84	273.84
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	35	280.24	280.24
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	36	286.64	286.64
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	37	293.04	293.04
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	38	296.56	296.56
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	39	300.07	300.07
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	40	311.91	311.91
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	41	324.07	324.07
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	42	336.86	336.86
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	43	349.98	349.98
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	44	363.74	363.74
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	45	377.81	377.81
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	46	392.53	392.53
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	47	407.88	407.88
73987DC0040060 Rating Area 1		Tobacco User/Non-Tobacco User	48	423.88	423.88

73987DC0040060	Rating Area 1		Tobacco User/Non-Tobacco User	49	440.51	440.51
	Rating Area 1		Tobacco User/Non-Tobacco User	50	457.79	457.79
	Rating Area 1		Tobacco User/Non-Tobacco User	51	475.71	475.71
	Rating Area 1		Tobacco User/Non-Tobacco User	52	494.26	494.26
	Rating Area 1		Tobacco User/Non-Tobacco User	53	513.45	513.45
	Rating Area 1		Tobacco User/Non-Tobacco User	54	533.61	533.61
	Rating Area 1		Tobacco User/Non-Tobacco User	55	554.40	554.40
	Rating Area 1		Tobacco User/Non-Tobacco User	56	576.16	576.16
	Rating Area 1		Tobacco User/Non-Tobacco User	57	598.55	598.55
	Rating Area 1		Tobacco User/Non-Tobacco User	58	621.90	621.90
	Rating Area 1		Tobacco User/Non-Tobacco User	59	646.22	646.22
	Rating Area 1		Tobacco User/Non-Tobacco User	60	671.49	671.49
	Rating Area 1		Tobacco User/Non-Tobacco User	61	697.69	697.69
	Rating Area 1		Tobacco User/Non-Tobacco User	62	697.69	697.69
	Rating Area 1		Tobacco User/Non-Tobacco User	63	697.69	697.69
	Rating Area 1		Tobacco User/Non-Tobacco User	64 and over	697.37	697.37
73987DC0040061	Rating Area 1		Tobacco User/Non-Tobacco User	0-14	357.95	357.95
73987DC0040061	Rating Area 1		Tobacco User/Non-Tobacco User	15	357.95	357.95
	Rating Area 1		Tobacco User/Non-Tobacco User	16	357.95	357.95
	Rating Area 1		Tobacco User/Non-Tobacco User	17	357.95	357.95
	Rating Area 1		Tobacco User/Non-Tobacco User	18	357.95	357.95
	Rating Area 1		Tobacco User/Non-Tobacco User	19	357.95	357.95
	Rating Area 1		Tobacco User/Non-Tobacco User	20	357.95	357.95
	Rating Area 1		Tobacco User/Non-Tobacco User	21	397.90	397.90
	Rating Area 1		Tobacco User/Non-Tobacco User	22	397.90	397.90
	Rating Area 1		Tobacco User/Non-Tobacco User	23	397.90	397.90
	Rating Area 1		Tobacco User/Non-Tobacco User	24	397.90	397.90
	Rating Area 1		Tobacco User/Non-Tobacco User	25	397.90	397.90
	Rating Area 1		Tobacco User/Non-Tobacco User	26	397.90	397.90
	Rating Area 1		Tobacco User/Non-Tobacco User	27	397.90	397.90
	Rating Area 1		Tobacco User/Non-Tobacco User	28	407.21	407.21
	Rating Area 1		Tobacco User/Non-Tobacco User	29	415.97	415.97
	Rating Area 1		Tobacco User/Non-Tobacco User	30	426.37	426.37
	Rating Area 1		Tobacco User/Non-Tobacco User	31	437.31	437.31
	Rating Area 1		Tobacco User/Non-Tobacco User	32	447.16	447.16
	Rating Area 1		Tobacco User/Non-Tobacco User	33	457.56	457.56
	Rating Area 1		Tobacco User/Non-Tobacco User	34	468.51	468.51
	Rating Area 1		Tobacco User/Non-Tobacco User	35	479.46	479.46
	Rating Area 1		Tobacco User/Non-Tobacco User	36	490.40	490.40
	Rating Area 1		Tobacco User/Non-Tobacco User	37	501.35	501.35
	Rating Area 1		Tobacco User/Non-Tobacco User	38	507.37	507.37
	Rating Area 1		Tobacco User/Non-Tobacco User	39	513.39	513.39
	Rating Area 1		Tobacco User/Non-Tobacco User	40	533.64	533.64
	Rating Area 1		Tobacco User/Non-Tobacco User	41	554.44	554.44
	Rating Area 1		Tobacco User/Non-Tobacco User	42	576.33	576.33
	Rating Area 1		Tobacco User/Non-Tobacco User	43	598.77	598.77
	Rating Area 1		Tobacco User/Non-Tobacco User	44	622.31	622.31
	Rating Area 1		Tobacco User/Non-Tobacco User	45	646.39	646.39
	Rating Area 1		Tobacco User/Non-Tobacco User	46	671.57	671.57
	Rating Area 1		Tobacco User/Non-Tobacco User	47	697.84	697.84
	Rating Area 1		Tobacco User/Non-Tobacco User	48	725.20	725.20
	Rating Area 1		Tobacco User/Non-Tobacco User	49	753.67	753.67
	Rating Area 1		Tobacco User/Non-Tobacco User	50	783.22	783.22
	Rating Area 1		Tobacco User/Non-Tobacco User	51	813.87	813.87
	Rating Area 1		Tobacco User/Non-Tobacco User	52	845.62	845.62
	Rating Area 1		Tobacco User/Non-Tobacco User	53	878.46	878.46
	Rating Area 1		Tobacco User/Non-Tobacco User	54	912.94	912.94
	Rating Area 1		Tobacco User/Non-Tobacco User	55	948.51	948.51
	Rating Area 1		Tobacco User/Non-Tobacco User	56	985.73	985.73
	Rating Area 1		Tobacco User/Non-Tobacco User	57	1024.04	1024.04
	Rating Area 1		Tobacco User/Non-Tobacco User	58	1064.00	1064.00
	Rating Area 1		Tobacco User/Non-Tobacco User	59	1105.59	1105.59
	Rating Area 1		Tobacco User/Non-Tobacco User	60	1148.83	1148.83
	Rating Area 1		Tobacco User/Non-Tobacco User	61	1193.66	1193.66
	Rating Area 1		Tobacco User/Non-Tobacco User	62	1193.66	1193.66
	Rating Area 1		Tobacco User/Non-Tobacco User	63	1193.66	1193.66

73987DC0040061 Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1193.11	1193.11
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2023 Rates Table Template v12.0		All fields with an asterisk (*) are required. To validate press Validate button or Ctrl + Shift + I. To finalize, press Finalize button or Ctrl + Shift + F.			
		If you are in a community rating state, select Family-Tier Rates under Rating Method and fill in all columns.			
		If you are not in a community rating state, select Age-Based Rates under Rating Method and provide an Individual Rate for every age band.			
		If Tobacco is Tobacco User/Non-Tobacco User, you must give a rate for Tobacco Use and Non-Tobacco Use.			
		To add a new sheet, press the Add Sheet button, or Ctrl + Shift + H. All plans must have the same dates on a sheet.			
HIOS Issuer ID*		73987			
Rate Effective Date*		10/1/2023			
Rate Expiration Date*		12/31/2023			
Rating Method*		Age-Based Rates			
Plan ID*	Rating Area ID*	Tobacco*	Age*	Individual Rate*	Individual Tobacco Rate*
Required: Enter the 14-character Plan ID	Required: Select the Rating Area ID	Required: Select if Tobacco use of subscriber is used to determine if a person is eligible for a rate from a plan	Required: Select the age of a subscriber eligible for the rate	Required: Enter the rate of an Individual Non-Tobacco or No Preference enrollee on a plan	Required: Enter the rate of an Individual tobacco enrollee on a plan
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	353.75	353.75
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	15	353.75	353.75
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	16	353.75	353.75
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	17	353.75	353.75
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	18	353.75	353.75
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	19	353.75	353.75
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	20	353.75	353.75
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	21	393.24	393.24
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	22	393.24	393.24
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	23	393.24	393.24
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	24	393.24	393.24
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	25	393.24	393.24
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	26	393.24	393.24
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	27	393.24	393.24
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	28	402.43	402.43
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	29	411.09	411.09
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	30	421.36	421.36
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	31	432.18	432.18
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	32	441.92	441.92
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	33	452.20	452.20
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	34	463.01	463.01
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	35	473.83	473.83
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	36	484.65	484.65
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	37	495.47	495.47
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	38	501.42	501.42
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	39	507.37	507.37
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	40	527.38	527.38
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	41	547.94	547.94
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	42	569.57	569.57
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	43	591.75	591.75
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	44	615.01	615.01
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	45	638.81	638.81
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	46	663.69	663.69
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	47	689.65	689.65
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	48	716.70	716.70
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	49	744.83	744.83
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	50	774.03	774.03
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	51	804.33	804.33
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	52	835.70	835.70
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	53	868.15	868.15
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	54	902.23	902.23
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	55	937.39	937.39
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	56	974.17	974.17
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	57	1012.03	1012.03
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	58	1051.52	1051.52
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	59	1092.63	1092.63
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	60	1135.36	1135.36
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	61	1179.66	1179.66
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	62	1179.66	1179.66
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	63	1179.66	1179.66
73987DC0040017	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1179.12	1179.12
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	276.89	276.89
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	15	276.89	276.89
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	16	276.89	276.89
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	17	276.89	276.89
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	18	276.89	276.89
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	19	276.89	276.89
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	20	276.89	276.89
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	21	307.80	307.80
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	22	307.80	307.80
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	23	307.80	307.80
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	24	307.80	307.80
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	25	307.80	307.80
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	26	307.80	307.80
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	27	307.80	307.80
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	28	314.99	314.99
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	29	321.77	321.77
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	30	329.81	329.81
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	31	338.28	338.28
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	32	345.90	345.90
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	33	353.94	353.94
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	34	362.41	362.41
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	35	370.88	370.88
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	36	379.35	379.35
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	37	387.82	387.82
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	38	392.47	392.47
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	39	397.13	397.13
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	40	412.79	412.79
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	41	428.88	428.88
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	42	445.82	445.82
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	43	463.18	463.18
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	44	481.38	481.38
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	45	500.01	500.01
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	46	519.49	519.49
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	47	539.81	539.81
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	48	560.98	560.98
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	49	582.99	582.99
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	50	605.86	605.86
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	51	629.56	629.56
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	52	654.12	654.12
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	53	679.52	679.52
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	54	706.20	706.20
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	55	733.72	733.72
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	56	762.51	762.51
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	57	792.14	792.14
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	58	823.05	823.05
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	59	855.23	855.23
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	60	888.67	888.67
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	61	923.35	923.35
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	62	923.35	923.35
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	63	923.35	923.35
73987DC0040029	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	922.92	922.92
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	342.08	342.08
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	15	342.08	342.08
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	16	342.08	342.08
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	17	342.08	342.08
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	18	342.08	342.08
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	19	342.08	342.08
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	20	342.08	342.08
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	21	380.26	380.26
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	22	380.26	380.26
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	23	380.26	380.26
73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	24	380.26	380.26

	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	25	380.26	380.26
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	26	380.26	380.26
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	27	380.26	380.26
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	28	389.15	389.15
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	29	397.52	397.52
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	30	407.46	407.46
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	31	417.92	417.92
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	32	427.33	427.33
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	33	437.27	437.27
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	34	447.73	447.73
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	35	458.19	458.19
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	36	468.65	468.65
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	37	479.12	479.12
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	38	484.87	484.87
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	39	490.62	490.62
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	40	509.98	509.98
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	41	529.85	529.85
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	42	550.77	550.77
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	43	572.22	572.22
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	44	594.71	594.71
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	45	617.72	617.72
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	46	641.79	641.79
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	47	666.89	666.89
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	48	693.04	693.04
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	49	720.24	720.24
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	50	748.49	748.49
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	51	777.78	777.78
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	52	808.12	808.12
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	53	839.50	839.50
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	54	872.45	872.45
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	55	906.45	906.45
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	56	942.02	942.02
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	57	978.63	978.63
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	58	1016.81	1016.81
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	59	1056.57	1056.57
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	60	1097.89	1097.89
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	61	1140.72	1140.72
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	62	1140.72	1140.72
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	63	1140.72	1140.72
	73987DC0040046	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1140.20	1140.20
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	269.78	269.78
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	15	269.78	269.78
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	16	269.78	269.78
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	17	269.78	269.78
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	18	269.78	269.78
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	19	269.78	269.78
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	20	269.78	269.78
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	21	299.89	299.89
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	22	299.89	299.89
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	23	299.89	299.89
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	24	299.89	299.89
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	25	299.89	299.89
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	26	299.89	299.89
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	27	299.89	299.89
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	28	306.91	306.91
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	29	313.51	313.51
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	30	321.34	321.34
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	31	329.59	329.59
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	32	337.02	337.02
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	33	344.86	344.86
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	34	353.11	353.11
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	35	361.36	361.36
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	36	369.61	369.61
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	37	377.86	377.86
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	38	382.39	382.39
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	39	386.93	386.93
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	40	402.19	402.19
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	41	417.87	417.87
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	42	434.37	434.37
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	43	451.28	451.28
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	44	469.02	469.02
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	45	487.17	487.17
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	46	506.15	506.15
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	47	525.95	525.95
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	48	546.57	546.57
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	49	568.02	568.02
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	50	590.30	590.30
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	51	613.40	613.40
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	52	637.32	637.32
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	53	662.07	662.07
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	54	688.06	688.06
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	55	714.87	714.87
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	56	742.92	742.92
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	57	771.80	771.80
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	58	801.91	801.91
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	59	833.26	833.26
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	60	865.85	865.85
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	61	899.64	899.64
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	62	899.64	899.64
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	63	899.64	899.64
	73987DC0040057	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	899.22	899.22
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	345.82	345.82
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	15	345.82	345.82
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	16	345.82	345.82
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	17	345.82	345.82
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	18	345.82	345.82
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	19	345.82	345.82
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	20	345.82	345.82
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	21	384.42	384.42
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	22	384.42	384.42
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	23	384.42	384.42
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	24	384.42	384.42
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	25	384.42	384.42
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	26	384.42	384.42
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	27	384.42	384.42
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	28	393.41	393.41
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	29	401.87	401.87
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	30	411.91	411.91
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	31	422.49	422.49
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	32	432.01	432.01
	73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	33	442.05	442.05

73987DC0040058	Rating Area 1	Tobacco User/Non-Tobacco User	34	452.63	452.63
	Rating Area 1	Tobacco User/Non-Tobacco User	35	463.20	463.20
	Rating Area 1	Tobacco User/Non-Tobacco User	36	473.78	473.78
	Rating Area 1	Tobacco User/Non-Tobacco User	37	484.35	484.35
	Rating Area 1	Tobacco User/Non-Tobacco User	38	490.17	490.17
	Rating Area 1	Tobacco User/Non-Tobacco User	39	495.99	495.99
	Rating Area 1	Tobacco User/Non-Tobacco User	40	515.55	515.55
	Rating Area 1	Tobacco User/Non-Tobacco User	41	535.64	535.64
	Rating Area 1	Tobacco User/Non-Tobacco User	42	556.80	556.80
	Rating Area 1	Tobacco User/Non-Tobacco User	43	578.47	578.47
	Rating Area 1	Tobacco User/Non-Tobacco User	44	601.21	601.21
	Rating Area 1	Tobacco User/Non-Tobacco User	45	624.48	624.48
	Rating Area 1	Tobacco User/Non-Tobacco User	46	648.80	648.80
	Rating Area 1	Tobacco User/Non-Tobacco User	47	674.18	674.18
	Rating Area 1	Tobacco User/Non-Tobacco User	48	700.62	700.62
	Rating Area 1	Tobacco User/Non-Tobacco User	49	728.12	728.12
	Rating Area 1	Tobacco User/Non-Tobacco User	50	756.67	756.67
	Rating Area 1	Tobacco User/Non-Tobacco User	51	786.28	786.28
	Rating Area 1	Tobacco User/Non-Tobacco User	52	816.95	816.95
	Rating Area 1	Tobacco User/Non-Tobacco User	53	848.68	848.68
	Rating Area 1	Tobacco User/Non-Tobacco User	54	881.99	881.99
	Rating Area 1	Tobacco User/Non-Tobacco User	55	916.36	916.36
	Rating Area 1	Tobacco User/Non-Tobacco User	56	952.32	952.32
	Rating Area 1	Tobacco User/Non-Tobacco User	57	989.33	989.33
	Rating Area 1	Tobacco User/Non-Tobacco User	58	1027.93	1027.93
	Rating Area 1	Tobacco User/Non-Tobacco User	59	1068.12	1068.12
	Rating Area 1	Tobacco User/Non-Tobacco User	60	1109.89	1109.89
	Rating Area 1	Tobacco User/Non-Tobacco User	61	1153.20	1153.20
	Rating Area 1	Tobacco User/Non-Tobacco User	62	1153.20	1153.20
	Rating Area 1	Tobacco User/Non-Tobacco User	63	1153.20	1153.20
	Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1152.67	1152.67
73987DC0040060	Rating Area 1	Tobacco User/Non-Tobacco User	0-14	214.54	214.54
73987DC0040060	Rating Area 1	Tobacco User/Non-Tobacco User	15	214.54	214.54
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	Rating Area 1	Tobacco User/Non-Tobacco User	26	238.49	238.49
	Rating Area 1	Tobacco User/Non-Tobacco User	27	238.49	238.49
	Rating Area 1	Tobacco User/Non-Tobacco User	28	244.07	244.07
	Rating Area 1	Tobacco User/Non-Tobacco User	29	249.32	249.32
	Rating Area 1	Tobacco User/Non-Tobacco User	30	255.55	255.55
	Rating Area 1	Tobacco User/Non-Tobacco User	31	262.11	262.11
	Rating Area 1	Tobacco User/Non-Tobacco User	32	268.02	268.02
	Rating Area 1	Tobacco User/Non-Tobacco User	33	274.25	274.25
	Rating Area 1	Tobacco User/Non-Tobacco User	34	280.81	280.81
	Rating Area 1	Tobacco User/Non-Tobacco User	35	287.37	287.37
	Rating Area 1	Tobacco User/Non-Tobacco User	36	293.93	293.93
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	Rating Area 1	Tobacco User/Non-Tobacco User	38	304.10	304.10
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	Rating Area 1	Tobacco User/Non-Tobacco User	40	319.85	319.85
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	Rating Area 1	Tobacco User/Non-Tobacco User	42	345.43	345.43
	Rating Area 1	Tobacco User/Non-Tobacco User	43	358.88	358.88
	Rating Area 1	Tobacco User/Non-Tobacco User	44	372.99	372.99
	Rating Area 1	Tobacco User/Non-Tobacco User	45	387.42	387.42
	Rating Area 1	Tobacco User/Non-Tobacco User	46	402.51	402.51
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	Rating Area 1	Tobacco User/Non-Tobacco User	48	434.66	434.66

73987DC0040060	Rating Area 1		Tobacco User/Non-Tobacco User	49	451.72	451.72
	Rating Area 1		Tobacco User/Non-Tobacco User	50	469.44	469.44
	Rating Area 1		Tobacco User/Non-Tobacco User	51	487.81	487.81
	Rating Area 1		Tobacco User/Non-Tobacco User	52	506.83	506.83
	Rating Area 1		Tobacco User/Non-Tobacco User	53	526.52	526.52
	Rating Area 1		Tobacco User/Non-Tobacco User	54	547.18	547.18
	Rating Area 1		Tobacco User/Non-Tobacco User	55	568.51	568.51
	Rating Area 1		Tobacco User/Non-Tobacco User	56	590.81	590.81
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	Rating Area 1		Tobacco User/Non-Tobacco User	59	662.66	662.66
	Rating Area 1		Tobacco User/Non-Tobacco User	60	688.57	688.57
	Rating Area 1		Tobacco User/Non-Tobacco User	61	715.44	715.44
	Rating Area 1		Tobacco User/Non-Tobacco User	62	715.44	715.44
	Rating Area 1		Tobacco User/Non-Tobacco User	63	715.44	715.44
	Rating Area 1		Tobacco User/Non-Tobacco User	64 and over	715.11	715.11
73987DC0040061	Rating Area 1		Tobacco User/Non-Tobacco User	0-14	367.06	367.06
73987DC0040061	Rating Area 1		Tobacco User/Non-Tobacco User	15	367.06	367.06
	Rating Area 1		Tobacco User/Non-Tobacco User	16	367.06	367.06
	Rating Area 1		Tobacco User/Non-Tobacco User	17	367.06	367.06
	Rating Area 1		Tobacco User/Non-Tobacco User	18	367.06	367.06
	Rating Area 1		Tobacco User/Non-Tobacco User	19	367.06	367.06
	Rating Area 1		Tobacco User/Non-Tobacco User	20	367.06	367.06
	Rating Area 1		Tobacco User/Non-Tobacco User	21	408.03	408.03
	Rating Area 1		Tobacco User/Non-Tobacco User	22	408.03	408.03
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	Rating Area 1		Tobacco User/Non-Tobacco User	24	408.03	408.03
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	Rating Area 1		Tobacco User/Non-Tobacco User	26	408.03	408.03
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	Rating Area 1		Tobacco User/Non-Tobacco User	30	437.21	437.21
	Rating Area 1		Tobacco User/Non-Tobacco User	31	448.44	448.44
	Rating Area 1		Tobacco User/Non-Tobacco User	32	458.54	458.54
	Rating Area 1		Tobacco User/Non-Tobacco User	33	469.20	469.20
	Rating Area 1		Tobacco User/Non-Tobacco User	34	480.43	480.43
	Rating Area 1		Tobacco User/Non-Tobacco User	35	491.65	491.65
	Rating Area 1		Tobacco User/Non-Tobacco User	36	502.88	502.88
	Rating Area 1		Tobacco User/Non-Tobacco User	37	514.10	514.10
	Rating Area 1		Tobacco User/Non-Tobacco User	38	520.28	520.28
	Rating Area 1		Tobacco User/Non-Tobacco User	39	526.45	526.45
	Rating Area 1		Tobacco User/Non-Tobacco User	40	547.22	547.22
	Rating Area 1		Tobacco User/Non-Tobacco User	41	568.54	568.54
	Rating Area 1		Tobacco User/Non-Tobacco User	42	590.99	590.99
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	Rating Area 1		Tobacco User/Non-Tobacco User	44	638.14	638.14
	Rating Area 1		Tobacco User/Non-Tobacco User	45	662.83	662.83
	Rating Area 1		Tobacco User/Non-Tobacco User	46	688.65	688.65
	Rating Area 1		Tobacco User/Non-Tobacco User	47	715.59	715.59
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	Rating Area 1		Tobacco User/Non-Tobacco User	56	1010.81	1010.81
	Rating Area 1		Tobacco User/Non-Tobacco User	57	1050.10	1050.10
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	Rating Area 1		Tobacco User/Non-Tobacco User	60	1178.06	1178.06
	Rating Area 1		Tobacco User/Non-Tobacco User	61	1224.03	1224.03
	Rating Area 1		Tobacco User/Non-Tobacco User	62	1224.03	1224.03
	Rating Area 1		Tobacco User/Non-Tobacco User	63	1224.03	1224.03

73987DC0040061 Rating Area 1	Tobacco User/Non-Tobacco User	64 and over	1223.46	1223.46
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SERFF Tracking #:	AETN-133232225	State Tracking #:		Company Tracking #:	DCAHISG2023
State:	District of Columbia	Filing Company:	Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN VA WV		
TOI/Sub-TOI:	HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO				
Product Name:	2023 DC AHI SG HMO				
Project Name/Number:	2023 Exchange - Aetna/HMO				

URRT

State Determination

Review Status:	Incomplete
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SERFF Tracking #:	AETN-133232225	State Tracking #:	Company Tracking #:	DCAHISG2023
State:	District of Columbia	Filing Company:	Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN VA WV	
TOI/Sub-TOI:	HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO			
Product Name:	2023 DC AHI SG HMO			
Project Name/Number:	2023 Exchange - Aetna/HMO			

URRT Items

Item Name	Attachment(s)
Unified Rate Review Template	<i>UnifiedRateReviewSubmission_20220501211355.xml</i>
Actuarial Memorandum	<i>DC_SG_73987_URRT_Part_III_Memo_and_Cert_AHI_2023.pdf</i>
Actuarial Memorandum - Redacted	<i>DC_SG_73987_URRT_Part_III_Memo_and_Cert_AHI_2023_redacted.pdf</i>

SERFF Tracking #:	AETN-133232225	State Tracking #:	Company Tracking #:	DCAHISG2023
State:	District of Columbia	Filing Company:	Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN VA WV	
TOI/Sub-TOI:	HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO			
Product Name:	2023 DC AHI SG HMO			
Project Name/Number:	2023 Exchange - Aetna/HMO			

Attachment UnifiedRateReviewSubmission_20220501211355.xml is not a PDF document and cannot be reproduced here.

Actuarial Memorandum and Certification

General Information

Company Identifying Information:

Company Legal Name: Aetna Health Inc.
State: District of Columbia
HIOS Issuer ID: 73987
Market: Small Group
Effective Date: 01/01/2023
Rate Filing Tracking Number: AETN-133232225
Policy Form(s):
Form Filing Tracking Number: AETN-133139939

Company Contact Information:

Name: Joanna Kluza
Telephone Number: 860-273-0099
Email Address: KluzaJ@aetna.com

1. Purpose, Scope, and Effective Date

The purpose of this filing is to:

- 1) Provide support for the development of the Part I Unified Rate Review Template;
- 2) Provide support for the assumptions and premiums rate development for the products supported by the policy forms referenced above;
- 3) Request approval of the proposed monthly premium rates; and
- 4) Provide benefit plan designs summaries for the products included in this filing.

The development of the rates reflects the impact of the market forces and rating requirements associated with the Patient Protection and Affordable Care Act (PPACA) and subsequent regulation.

These rates are for plans issued in District of Columbia beginning January 1, 2023. The rates comply with all rating guidelines under federal and state regulations. The filing covers plans that will be offered outside the public Marketplace in District of Columbia.

2. Proposed Rate Increase

Monthly premium rates for Small Group Market products in District of Columbia are being revised for effective dates January 1, 2023 through December 31, 2023.

A. Reason for Rate Increase(s):

- Impact of medical claim trend (including changes in provider unit costs and increased utilization of medical cost services) and pharmacy trend;
- Revisions to our assumptions about market-wide population morbidity and the projected population distribution;
- Revisions to administrative expense projections;
- Modifications in cost sharing to ensure that plans comply with Actuarial Value requirements;
- Updates to our pricing models used to determine the impact of cost sharing designs;
- Changes in provider networks and contracts.

- Expected claim cost increase of 4.8% due to COVID-19 testing and vaccinations.

B. Variation in Rate Changes by Plan/Product:

Rate changes differ by plan for the following reasons:

- Provider cost estimates have been updated, and the change differs by network.
- Modification to cost sharing differs by plan in order to maintain compliance with Actuarial Value and other regulatory requirements.
- Our internal pricing models have been updated to reflect more current information on levels of induced demand associated with different benefit designs. These changes impact our estimates of the relative costs of the plan designs that will be offered.

Exhibit 1 shows the average threshold increases for products covered by this filing.

3. Experience Period Premium and Claims

A. Paid Through Date:

The experience data reported in Worksheet 1, Section I of the Part I Unified Rate Review Template reflects incurred claims from January 1, 2021 through December 31, 2021 and paid through March 31, 2022.

B. Current Date: The current enrollment and premium is reported as of March 31, 2022.

C. Premiums (Net of MLR Rebate) in Experience Period:

Experience period premiums are date-of-service premiums from our actuarial experience databases for non-grandfathered Small Group business in District of Columbia. Our internal projections indicate that no MLR rebate is expected to be paid in 2022 (for 2021 experience) for the Small Group MLR Pool in District of Columbia. As such, no adjustment was made to premiums to account for expected rebates.

D. Allowed and Incurred Claims Incurred During the Experience Period:

Allowed and incurred claims are sourced from our actuarial experience databases. These databases provide member-level detail on total allowed and incurred claims but do not include unit cost or utilization metrics. We allocate claims to cost categories and estimate the corresponding unit costs and utilization metrics by using an alternate reporting system that calculates unit cost and utilization metrics by medical cost category but only permits inclusion/exclusion of experience at the market and segment levels. A reconciliation of aggregate data in our actuarial experience databases is performed to ensure that data is consistent with the experience data contained in our enterprise-wide data warehouse.

Total incurred claims are developed by estimating the incurred but not reported (IBNR) reserves using aggregate block of business paid claims. Paid claims are adjusted using the IBNR completion factors. More specifically, historical claim payment patterns are used to predict the ultimate incurred claims for each date-of-service month. The IBNR is estimated using actuarial principles and assumptions which consider historical claim submission and adjudication patterns, unit cost and utilization trends, claim inventory levels, changes in membership and product mix, seasonality, and other relevant factors including a review of large claims. This same process is used to develop IBNR estimates for allowed claims.

As noted above, the experience period reflects three months of paid claim run-off. The IBNR reserves account for approximately 1.2% of the experience period incurred claims.

In addition to the fee-for-service and capitation payments discussed above, some of our provider contracts include provisions under which we share claim cost differences with the provider relative to a pre-determined target amount. These adjustments serve to increase our claims cost when results are favorable to the target and decrease our claims costs when results are unfavorable. We adjust both allowed and incurred claims by our current estimate of the impact of provider risk sharing provisions.

Aetna recognizes that COVID-19 has had an impact on the level of allowed and incurred claims in the experience period of January 1, 2021 through December 31, 2021. We have internally developed factors to adjust 2021 experience, using calendar year 2019 experience as our baseline claims data. These factors were developed using experience paid-thru January 31, 2022.

4. Benefit Categories

Our internal systems assign claims to several benefit categories. We have mapped these categories to the categories described in the Unified Rate Review Instructions released in April 2022. Inpatient Hospital consists of care delivered at an inpatient facility and associated expenses, including day-based mental health services. Outpatient Hospital includes outpatient surgical, outpatient mental health, and emergency care and associated expenses. Professional includes both specialty physician and primary care physician expenses, including office-based mental health services. Other includes dental, home health care, medical pharmacy expenses, laboratory expenses, and radiology expenses. Non-capitated ambulance is included in the Outpatient Hospital category when billed by the facility and included in Specialist Physician otherwise. Prescription Drug includes drugs dispensed by a pharmacy.

The utilization for these services are counted by service type, and aggregated for each benefit category. Inpatient Hospital utilization is counted as days; Outpatient Hospital, Professional, and Other Medical utilization are counted as visits. Prescription Drug utilization is counted per script.

5. Projection Factors

A. Changes in the Morbidity of the Population Insured:

The experience period data includes experience for community-rated policies issued to small employers in 2021.

We also considered the expected morbidity of the DC small group ACA population and the likely population that will be covered by Small Group Single Risk Pool policies in 2023 and have adjusted our projections for this morbidity change accordingly.

B. Plan Design Changes:

The products included in this filing include benefits necessary to comply with the Essential Health Benefit requirements. The experience data includes experience for Single Risk Pool products that have essentially identical benefits and coverage issued outside the Single Risk Pool which does not cover all EHBs. The projection factor reflects the pro-rated impact of these additional benefits, as well as any changes in 2023 State Benchmark EHBs, and newly mandated benefits.

The change in projected utilization due to changes in benefits is also considered. As cost sharing decreases (measured by increasing Actuarial Value), utilization increases. This pattern is reflected in the factors that are built into the federal risk adjustment mechanism that started in 2014. The federal risk adjustment program factors and other proprietary models were considered in the development of the utilization change. The average cost sharing in the experience period was compared with the average cost sharing in the projection period. From the average cost sharing change, an expected utilization change was derived.

C. Changes in Demographics:

Experience data was normalized for projected changes in the age/gender mix and area mix using internally-developed factors. Exhibits 2 and 3 contain detail on the calculations of the impact of demographic mix shifts.

D. Other Adjustments:

The 'Other' adjustment includes the projected impact of changes in network composition and provider contracts, expected morbidity changes, changes in benefits, and changes in demographics.

E. Trend Factors (Cost/Utilization):

Medical trend factors are based on our Medical Economics Unit's national guidance coupled with local trend and network experience, based on analysis of a continuous normalized population, excluding catastrophic claims. Allowed medical trend includes known and anticipated changes in provider contract rates, severity and medical technology impacts, and expected changes in utilization. The impact of benefit leveraging is accounted for separately in the projected paid to allowed ratio.

Pharmacy trends are based on national commercial group Rx trend analysis. Pharmacy trend considers the impact of formulary changes, patent expirations, new drugs, other general market share shifts, and overall utilization trend. Pharmacy Trend is expressed in terms of allowed trend less rebates.

Year 1 and Year 2 trends on Worksheet 1 specify annual trends, with 12 months of trend applied to each year.

Exhibit 8 shows the anticipated annual trend from the experience period to the rating period.

6. Manual Rate Adjustments:

A. Source and Appropriateness of Experience Data Used:

The source data for our manual rate is the experience incurred from January 1, 2020 to December 31, 2021 and paid through March 2022 for issuers 12028 and 86443 in the Virginia Small Group HMO & PPO market. The Small Group market experience is considered an appropriate source for the manual rate due to similarities in covered benefits and market dynamics to the current ACA Small Group market. The similar dynamics include: no individual medical underwriting and rating by gender, limits on age-rating, and caps for rating on the number of dependents, as well as plans benefits and cost-sharing.

B. Adjustments Made to the Data:

The Small Group experience used as the basis for the manual rate was adjusted in a similar manner as the base period experience for changes in population risk morbidity, benefits, and demographic and area normalizations. The data is further adjusted for projected changes in network, provider contract rates, and claims adjudication, in addition to unit cost and utilization trend.

C. Inclusion of Capitation Payments:

No services provided in 2023 will be covered by capitation arrangements. We have adjusted the experience data to incorporate our best-estimate of the impact of moving to fee for service payment approaches.

7. Credibility of Experience

The CMS Medicare full credibility standard is 24,000 member months. Based on our experience, the Medicare population has significantly higher utilization than Commercial populations. Using actuarial judgement, we have assigned 12% credibility to the base experience data and 88% to the manual experience.

8. Risk Adjustment

A. Risk Adjustment – Experience Period

Risk Adjustment transfer is accrued at the issuer and market level based on 2021 CMS Interim report. The transfer is allocated to the member-level based by applying the HHS risk transfer calculation to each member relative to the imputed market-average, such that members with higher resulting relative transfers scores may have a receivable and members with lower resulting scores may have a payable, regardless of the net market risk transfer result. The resulting member transfers are summed to the HIOS plan level.

B. Risk Adjustment – Projection Period

Due to the small size of the block, the volatility in the risk adjuster has increased. After reviewing the historic relationship between the entity-specific risk to the market as well the latest view in the 2021 CMS interim report, the 2023 risk adjuster was developed. The risk profile was inputted into the transfer formula to develop our prospective risk adjustment transfer amount.

In addition, the projected risk adjustment transfer includes changes that were outlined in the 2023 Notice of Benefit and Payment Parameters. The 2023 projected market average premium used in the payment transfer formula is also reduced by 14% to remove administrative cost.

As a result, we project a risk adjustment receivable, net of the 2023 user fee of \$0.22 PBMPM. The resulting PMPM adjustment, net of risk adjustment user fees, is \$235.25.

9. Non-Benefit Expenses and Profit & Risk

The retention portion of the projected premium is illustrated in Exhibit 5.

The prospective general and administrative expenses are set to achieve the 80% MLR threshold requirement. Actual general and administrative expenses are based on historical corporate Small Group market expense levels, 2022 projections, and projected changes in expenses, inflation, and membership for 2023 for our National book of Small Group business.

A flat commission per policy per month will be paid to all brokers in DC during open enrollment. Commissions do not vary by plan.

Federal taxes include PPACA Taxes and Fees are based on the Notice of Benefit and Payment Parameters for 2023, as well as Federal income tax and State Premium taxes. State premium taxes are estimated on most current known levels and include any known assessments.

The profit and risk load is consistent with the pricing of our 2022 plans.

10. Projected Loss Ratio

The expected 2023 MLR for this filing, as defined by PPACA and before any credibility adjustment, is shown in Exhibit 6.

11. Single Risk Pool

The plans and rates included in the Part I URRT are those for all plans we intend to offer in the Small Group market in the District of Columbia through Aetna Health Inc. The proposed rates comply with the Single Risk Pool requirements of 45 CFR §156.80(d).

12. Index Rate

The index rates for the experience and projection periods are set equal to the actual and projected allowed claims, respectively, less non-essential health benefits.

The index rate reflects the projected mix of business by plan. The AV pricing values for each plan are based on our internal company modeling of plan cost-sharing designs, the plan's provider network, delivery system characteristics, and utilization management practices, the impacts (as applicable) of benefits in addition to EHBs catastrophic eligibility criteria, and the distribution and administrative costs applicable to the plan/product. Rates do not differ for any characteristic other than those allowable under the regulations as described in 45 CFR 156 §156.80(d)(2).

Small Group Market Trend Adjustments: Exhibit 7 illustrates the quarterly trend factors, the resulting index rate for effective dates during each calendar quarter, the projected membership distribution by effective date, and the weighted-average index rate. Trend factors are developed from annual forward trend and leveraging. A trend factor of 1.00 corresponds to a policy period that begins January 1, 2023.

13. Market-Adjusted Index Rate

Worksheet 1 illustrates the development of the Market Adjusted Index Rate. The market-wide adjustment for Risk Adjustment was discussed, previously. The risk adjustment is displayed on an allowed-basis and the exchange user fee is estimated as a PMPM based on the target premium rate on Worksheet 1 of the URRT.

14. Plan-Adjusted Index Rates

Section 3 of Worksheet 2 illustrates the development of the Plan Adjusted Index Rates and displays each plan-specific adjustment made to the Market Adjusted Index Rate. The 2023 Plan Adjusted Index Rates are displayed in Line 3.10. The following briefly describes how each set of adjustments was determined.

A. Actuarial Value, Cost Sharing:

The factors in Line 3.3 are the product of two separate adjustments:

1. We used internal models developed on large group claims experience to estimate the impact of different cost sharing designs. The combination of these two analyses is a projection of the relative paid to allowed ratio which also reflects the impact of out of network coverage.
2. We applied an adjustment for the impact different levels of cost sharing have on the use of medical services, which is based in part on the induced utilization factors used in the Risk Adjustment program. These adjustments are first normalized to result in an aggregate factor of 1.0 when applied to the projected 2023 membership.

B. Distribution and Administrative Costs:

Section 3 of Worksheet 2 also reflects the adjustment for projected administrative costs, including sales, marketing, any commission expense, profit, and risk. These are discussed above in the 'Non-Benefit Expenses and Profit & Risk' section, excluding the Risk Adjustment User Fee, and the Exchange User Fee, which are reflected in the Market-Adjusted Index Rate. These expense and profit assumptions do not vary by plan.

C. Provider Network, Delivery System, and Utilization Management:

The factors in Line 3.4 reflect the impact of differences in the network size, efficiency, and provider contract terms. We worked with our contracting area and other subject matter experts to review the impact of these differences and the expected impact on allowed claims.

D. Benefits in addition to EHBs:

The factors in Line 3.5 adjust for the impact of benefits in addition to EHBs.

E. Catastrophic Plan Eligibility:

This filing does not include catastrophic plans.

15. Calibration

A. Age Curve Calibration:

The age factors are based on the HHS Default Standard Age curve. We then project a premium-weighted average age factor for the 2023 membership using the prescribed age curve and the projected age distribution. The calibration factor is the reciprocal of this weighted average factor.

The age that most closely corresponds to the premium weighted overall average age factor is the average age for the single risk pool.

B. Geographic Factor Calibration:

Projected area factors are shown in Exhibit 3. Unit cost trend studies were used to evaluate whether there were significant changes to network costs that would require changes from previously filed rating area factors. The geographic calibration factor is the reciprocal of the projected average area factor

C. Tobacco Factor Calibration

We are not applying a tobacco factor in our rating.

16. Consumer-Adjusted Premium Rate Development

Rates are determined using the prescribed member build-up approach. In the event that a family includes more than three child dependents under age 21, only the three oldest child dependents will be considered in determining the family's premium. Additional child dependents (non-billable members) will not be included in the rate calculation.

The premium for each billable member is calculated as:

Calibrated Plan Adjusted Index Rate * Age Factor * Area Factor * Trend Factor

The resulting rate is rounded to the nearest cent, and rates are then summed for all billable family members.

An example of a contract's premium determined by the member build-up calculation is shown in Exhibit 9.

17. Composite Premiums

Small employers will be able to elect to have rates set using a composite approach as permitted by DC.

18. AV Metal Values

The AV Metal Values on Worksheet 2 were based on the Draft 2023 AV Calculator. As applicable, entries were modified to reflect the plan appropriately and/or adjustments were made for plan design features that could not be entered in the calculator per 45 CFR Part 156, §156.135. The accompanying certification discusses how the benefits were modified to fit the parameters and the development of any adjustments. The AV screen shots provide detail on the modified entries and adjustments to AV, as applicable.

19. AV Pricing Values

The AV Pricing Values are calculated as the ratio of the Plan Adjusted Index Rate to the Market Adjusted Index Rate. The adjustments reflected in the AV Pricing Values are discussed in Section 14. AV Pricing Values do not differ based on morbidity differences or benefit selection anticipated within the Single Risk Pool.

20. Membership Projections

Exhibit A summarizes the membership distribution by plan. Membership projections on Worksheet 2 are based on historical experience, enrollment in ACA-compliant plans through March 2022, and our expectations for future sales as additional members move to these plans from grandfathered and transitional plans.

Terminated Plans and Products

Exhibit 10 provides a plan and product crosswalk from 2021 to 2023. The crosswalk includes the list of products that have experience in the single risk pool experience period, and products that were made available in 2022 and 2023.

Consistent with the URRT instructions, experience for non-single risk pool terminated products is reported in aggregate under the terminated product with the largest membership in the experience period.

21. Plan Type

All plans are consistent with the plan type indicated on Worksheet 2.

22. Benefit Design

This filing includes one Expanded Bronze, two Silver, and four Gold plans.

Please refer to the corresponding policy forms for detailed benefit language. Exhibit A-2 provides the screenshots from the AV Calculator. All benefit and cost sharing parameters comply with DC benefit mandates and the requirements of PPACA, including preventive care benefits, deductible limits, and Actuarial Value requirements.

23. Marketing

Plans will be available outside of the public Marketplace. These plans may be marketed in a variety of means, including HHS Planfinder and our own website. In addition, members of our 2022 plans will be mailed a discontinuance or renewal letter, in accordance with CMS guidelines. Marketing and distribution approaches may change from time to time at management's discretion.

24. Underwriting

Aetna will verify applicant eligibility for these plans based on any applicable age or geographic limitations.

25. Renewability

These policies are guaranteed renewable as required under §2703 of the Public Health Service Act.

26. Company Financial Condition

As of December 31, 2021, the capital and surplus held by Aetna Health Inc. was approximately \$660 million. This amount is disclosed in page 3, line 33 of the Company's statutory financial statement dated December 31, 2021. The Company issues insurance nationwide for multiple lines of business including, large group medical, Small Group medical, and various non-medical products.

Reliance

While I have reviewed the reasonableness of the assumptions and data in support of both the preparation of the Part I Unified Rate Review Template and the rate development applicable to the products discussed in this filing, I relied on the expertise of other Aetna employees, along with work products produced at their direction, for the following items:

- Experience Period MLR Rebates

- Risk Adjustment Transfer
- Actuarial Value, Modifications, and Benefit Relativities
- Supplemental EHB Pricing
- Population Risk Morbidity
- Medical Cost and Utilization Trend
- Rx Cost and Utilization Trend
- Components of Retention/Administrative Fees
- Value of Network Arrangements
- MH Net Trend
- Experience Period Data – Small Group

Certification

While this memorandum discusses both our development of rates for these products and the completion of the Part I Unified Rate Review Template (URRT), the Part I URRT does not demonstrate the process used by Aetna to develop the rates. Rather, it represents information required by Federal regulation to be provided in support of the review of rate increases, for certification of qualified health plans for Federally-facilitated marketplaces, and for certification that the index rate is developed in accordance with Federal regulation, is used consistently, and is only adjusted by the allowable modifiers. The information provided above is intended to comply with these requirements.

I, Joanna Kluza, am an Associate of the Society of Actuaries, a member of the American Academy of Actuaries, and am qualified in the area of health insurance. I hereby certify that to the best of my knowledge and judgment:

1. This rate filing is in compliance with the applicable laws and regulations of the District of Columbia, the requirements under federal law and regulation, and all applicable Actuarial Standards of Practice, including but not limited to:
 - a. ASOP No. 5, Incurred Health and Disability Claims
 - b. ASOP No. 8, Regulatory Filings for Health Benefits, Accident and Health Insurance, and Entities Providing Health
 - c. ASOP No. 12, Risk Classification
 - d. ASOP No. 23, Data Quality
 - e. ASOP No. 25, Credibility Procedures Applicable to Accident and Health, Group Term Life, and Property/Casualty Coverages
 - f. ASOP No. 26, Compliance with Statutory and Regulatory Requirements for the Actuarial Certification of Small Employer Health Benefit Plans
 - g. ASOP No. 41, Actuarial Communications
 - h. ASOP No. 50, Determining Minimum Value and Actuarial Value under the Affordable Care Act
2. The Projected Index Rate is:
 - a. In compliance with all applicable State and Federal Statutes and Regulations (45 CFR 156.80(d)(1) and 147.102),
 - b. Developed in compliance with the applicable Actuarial Standards of Practice,
 - c. Reasonable in relation to the benefits provided and the population anticipated to be covered,
 - d. Neither excessive, deficient, nor unfairly discriminatory.

3. The Index Rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan-level rates.
4. Adjustments to the MAIR for benefits the plan offers in addition to essential health benefits included in Worksheet 2, Section III were calculated in accordance with actuarial standards of practice.
5. The geographic rating factors reflect only differences in the costs of delivery (which include unit costs and provider practice pattern differences) and do not include differences for population morbidity by geographic area.
6. The AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I Unified Rate Review Template for all plans. Adjustments made to reflect benefit features not handled by the AV Calculator are discussed in the attached certification required by 45 CFR Part 156, §156.135.



Joanna Kluza, ASA, MAAA
Aetna Health Inc.

May 2, 2022

Date

Actuarial Memorandum and Certification

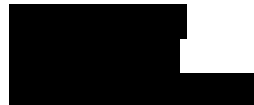
General Information

Company Identifying Information:

Company Legal Name: Aetna Health Inc.
State: District of Columbia
HIOS Issuer ID: 73987
Market: Small Group
Effective Date: 01/01/2023
Rate Filing Tracking Number: AETN-133232225
Policy Form(s):
Form Filing Tracking Number: AETN-133139939

Company Contact Information:

Name:
Telephone Number:
Email Address:



1. Purpose, Scope, and Effective Date

The purpose of this filing is to:

- 1) Provide support for the development of the Part I Unified Rate Review Template;
- 2) Provide support for the assumptions and premiums rate development for the products supported by the policy forms referenced above;
- 3) Request approval of the proposed monthly premium rates; and
- 4) Provide benefit plan designs summaries for the products included in this filing.

The development of the rates reflects the impact of the market forces and rating requirements associated with the Patient Protection and Affordable Care Act (PPACA) and subsequent regulation.

These rates are for plans issued in District of Columbia beginning January 1, 2023. The rates comply with all rating guidelines under federal and state regulations. The filing covers plans that will be offered outside the public Marketplace in District of Columbia.

2. Proposed Rate Increase

Monthly premium rates for Small Group Market products in District of Columbia are being revised for effective dates January 1, 2023 through December 31, 2023.

A. Reason for Rate Increase(s):

- Impact of medical claim trend (including changes in provider unit costs and increased utilization of medical cost services) and pharmacy trend;
- Revisions to our assumptions about market-wide population morbidity and the projected population distribution;
- Revisions to administrative expense projections;
- Modifications in cost sharing to ensure that plans comply with Actuarial Value requirements;
- Updates to our pricing models used to determine the impact of cost sharing designs;
- Changes in provider networks and contracts.

B. Variation in Rate Changes by Plan/Product:

Rate changes differ by plan for the following reasons:

- Provider cost estimates have been updated, and the change differs by network.
- Modification to cost sharing differs by plan in order to maintain compliance with Actuarial Value and other regulatory requirements.
- Our internal pricing models have been updated to reflect more current information on levels of induced demand associated with different benefit designs. These changes impact our estimates of the relative costs of the plan designs that will be offered.

Exhibit 1 shows the average threshold increases for products covered by this filing.

3. Experience Period Premium and Claims

A. Paid Through Date:

The experience data reported in Worksheet 1, Section I of the Part I Unified Rate Review Template reflects incurred claims from January 1, 2021 through December 31, 2021 and paid through March 31, 2022.

B. Current Date: The current enrollment and premium is reported as of March 31, 2022.

C. Premiums (Net of MLR Rebate) in Experience Period:

Experience period premiums are date-of-service premiums from our actuarial experience databases for non-grandfathered Small Group business in District of Columbia.

D. Allowed and Incurred Claims Incurred During the Experience Period:

Allowed and incurred claims are sourced from our actuarial experience databases. These databases provide member-level detail on total allowed and incurred claims but do not include unit cost or utilization metrics. We allocate claims to cost categories and estimate the corresponding unit costs and utilization metrics by using an alternate reporting system that calculates unit cost and utilization metrics by medical cost category but only permits inclusion/exclusion of experience at the market and segment levels. A reconciliation of aggregate data in our actuarial experience databases is performed to ensure that data is consistent with the experience data contained in our enterprise-wide data warehouse.

Total incurred claims are developed by estimating the incurred but not reported (IBNR) reserves using aggregate block of business paid claims. Paid claims are adjusted using the IBNR completion factors. More specifically, historical claim payment patterns are used to predict the ultimate incurred claims for each date-of-service month. The IBNR is estimated using actuarial principles and assumptions which consider historical claim submission and adjudication patterns, unit cost and utilization trends, claim inventory levels, changes in membership and product mix, seasonality, and other relevant factors including a review of large claims. This same process is used to develop IBNR estimates for allowed claims.

As noted above, the experience period reflects three months of paid claim run-off.

4. Benefit Categories

Our internal systems assign claims to several benefit categories. We have mapped these categories to the categories described in the Unified Rate Review Instructions released in April 2022. Inpatient Hospital consists of care delivered at an inpatient facility and associated expenses, including day-based mental health services. Outpatient Hospital includes outpatient surgical, outpatient mental health, and emergency care and associated expenses. Professional includes both specialty physician and primary care physician expenses, including office-based mental health services. Other includes dental, home health care, medical pharmacy expenses, laboratory expenses, and radiology expenses. Non-capitated ambulance is included in the Outpatient Hospital category when billed by the facility and included in Specialist Physician otherwise. Prescription Drug includes drugs dispensed by a pharmacy.

The utilization for these services are counted by service type, and aggregated for each benefit category. Inpatient Hospital utilization is counted as days; Outpatient Hospital, Professional, and Other Medical utilization are counted as visits. Prescription Drug utilization is counted per script.

5. Projection Factors

A. Changes in the Morbidity of the Population Insured:

The experience period data includes experience for community-rated policies issued to small employers in 2021.

We also considered the expected morbidity of the DC small group ACA population and the likely population that will be covered by Small Group Single Risk Pool policies in 2023 and have adjusted our projections for this morbidity change accordingly.

B. Plan Design Changes:

The products included in this filing include benefits necessary to comply with the Essential Health Benefit requirements. The experience data includes experience for Single Risk Pool products that have essentially identical benefits and coverage issued outside the Single Risk Pool which does not cover all EHBs. The projection factor reflects the pro-rated impact of these additional benefits, as well as any changes in 2023 State Benchmark EHBs, and newly mandated benefits.

The change in projected utilization due to changes in benefits is also considered. As cost sharing decreases (measured by increasing Actuarial Value), utilization increases. This pattern is reflected in the factors that are built into the federal risk adjustment mechanism that started in 2014. The federal risk adjustment program factors and other proprietary models were considered in the development of the utilization change. The average cost sharing in the experience period was compared with the average cost sharing in the projection period. From the average cost sharing change, an expected utilization change was derived.

C. Changes in Demographics:

Experience data was normalized for projected changes in the age/gender mix and area mix using internally-developed factors. Exhibits 2 and 3 contain detail on the calculations of the impact of demographic mix shifts.

D. Other Adjustments:

The 'Other' adjustment includes the projected impact of changes in network composition and provider contracts, expected morbidity changes, changes in benefits, and changes in demographics.

E. Trend Factors (Cost/Utilization):

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

6. Manual Rate Adjustments:

A. Source and Appropriateness of Experience Data Used:

[REDACTED]

B. Adjustments Made to the Data:

[REDACTED]

C. Inclusion of Capitation Payments:

[REDACTED]

7. Credibility of Experience

[REDACTED]

8. Risk Adjustment

A. Risk Adjustment – Experience Period

[REDACTED]

B. Risk Adjustment – Projection Period

[REDACTED]

[REDACTED]

[REDACTED]

9. Non-Benefit Expenses and Profit & Risk

[REDACTED]

[REDACTED]

Actual general and administrative expenses are based on historical corporate Small Group market expense levels, 2022 projections, and projected changes in expenses, inflation, and membership for 2023 for our National book of Small Group business.

A flat commission per policy per month will be paid to all brokers in DC during open enrollment. Commissions do not vary by plan.

Federal taxes include PPACA Taxes and Fees are based on the Notice of Benefit and Payment Parameters for 2023, as well as Federal income tax and State Premium taxes. State premium taxes are estimated on most current known levels and include any known assessments.

[REDACTED]

10. Projected Loss Ratio

[REDACTED]

11. Single Risk Pool

The plans and rates included in the Part I URRT are those for all plans we intend to offer in the Small Group market in the District of Columbia through Aetna Health Inc. The proposed rates comply with the Single Risk Pool requirements of 45 CFR §156.80(d).

12. Index Rate

The index rates for the experience and projection periods are set equal to the actual and projected allowed claims, respectively, less non-essential health benefits.

The index rate reflects the projected mix of business by plan. The AV pricing values for each plan are based on our internal company modeling of plan cost-sharing designs, the plan's provider network, delivery system characteristics, and utilization management practices, the impacts (as applicable) of benefits in addition to EHBs catastrophic eligibility criteria, and the distribution and administrative costs applicable to the plan/product. Rates do not differ for any characteristic other than those allowable under the regulations as described in 45 CFR 156 §156.80(d)(2).

Small Group Market Trend Adjustments:

[REDACTED]

13. Market-Adjusted Index Rate

[REDACTED]

14. Plan-Adjusted Index Rates

[REDACTED]

A. Actuarial Value, Cost Sharing:

[REDACTED]

B. Distribution and Administrative Costs:

[REDACTED]

C. Provider Network, Delivery System, and Utilization Management:

[REDACTED]

D. Benefits in addition to EHBs:

[REDACTED]

E. Catastrophic Plan Eligibility:

This filing does not include catastrophic plans.

15. Calibration

A. Age Curve Calibration:

[REDACTED]

B. Geographic Factor Calibration:

[REDACTED]

C. Tobacco Factor Calibration

We are not applying a tobacco factor in our rating.

16. Consumer-Adjusted Premium Rate Development

Rates are determined using the prescribed member build-up approach. In the event that a family includes more than three child dependents under age 21, only the three oldest child dependents will be considered in determining the family's premium. Additional child dependents (non-billable members) will not be included in the rate calculation.

The premium for each billable member is calculated as:

Calibrated Plan Adjusted Index Rate * Age Factor * Area Factor * Trend Factor

The resulting rate is rounded to the nearest cent, and rates are then summed for all billable family members.

[REDACTED]

17. Composite Premiums

Small employers will be able to elect to have rates set using a composite approach as permitted by DC.

18. AV Metal Values

The AV Metal Values on Worksheet 2 were based on the Draft 2023 AV Calculator. As applicable, entries were modified to reflect the plan appropriately and/or adjustments were made for plan design features that could not be entered in the calculator per 45 CFR Part 156, §156.135. The accompanying certification discusses how the benefits were modified to fit the parameters and the development of any adjustments. The AV screen shots provide detail on the modified entries and adjustments to AV, as applicable.

19. AV Pricing Values

The AV Pricing Values are calculated as the ratio of the Plan Adjusted Index Rate to the Market Adjusted Index Rate. The adjustments reflected in the AV Pricing Values are discussed in Section 14. AV Pricing Values do not differ based on morbidity differences or benefit selection anticipated within the Single Risk Pool.

20. Membership Projections

[REDACTED]

Terminated Plans and Products

Exhibit 10 provides a plan and product crosswalk from 2021 to 2023. The crosswalk includes the list of products that have experience in the single risk pool experience period, and products that were made available in 2022 and 2023.

Consistent with the URRT instructions, experience for non-single risk pool terminated products is reported in aggregate under the terminated product with the largest membership in the experience period.

21. Plan Type

All plans are consistent with the plan type indicated on Worksheet 2.

22. Benefit Design

This filing includes one Expanded Bronze, two Silver, and four Gold plans.

Please refer to the corresponding policy forms for detailed benefit language. Exhibit A-2 provides the screenshots from the AV Calculator. All benefit and cost sharing parameters comply with DC benefit mandates and the requirements of PPACA, including preventive care benefits, deductible limits, and Actuarial Value requirements.

23. Marketing

Plans will be available outside of the public Marketplace. These plans may be marketed in a variety of means, including HHS Planfinder and our own website. In addition, members of our 2022 plans will be mailed a discontinuance or renewal letter, in accordance with CMS guidelines. Marketing and distribution approaches may change from time to time at management's discretion.

24. Underwriting

Aetna will verify applicant eligibility for these plans based on any applicable age or geographic limitations.

25. Renewability

These policies are guaranteed renewable as required under §2703 of the Public Health Service Act.

26. Company Financial Condition

[REDACTED]

Reliance

While I have reviewed the reasonableness of the assumptions and data in support of both the preparation of the Part I Unified Rate Review Template and the rate development applicable to the products discussed in this filing, I relied on the expertise of other Aetna employees, along with work products produced at their direction, for the following items:

[REDACTED]

[REDACTED]

Certification

While this memorandum discusses both our development of rates for these products and the completion of the Part I Unified Rate Review Template (URRT), the Part I URRT does not demonstrate the process used by Aetna to develop the rates. Rather, it represents information required by Federal regulation to be provided in support of the review of rate increases, for certification of qualified health plans for Federally-facilitated marketplaces, and for certification that the index rate is developed in accordance with Federal regulation, is used consistently, and is only adjusted by the allowable modifiers. The information provided above is intended to comply with these requirements.

I, [REDACTED], am [REDACTED], and am qualified in the area of health insurance. I hereby certify that to the best of my knowledge and judgment:

1. This rate filing is in compliance with the applicable laws and regulations of the District of Columbia, the requirements under federal law and regulation, and all applicable Actuarial Standards of Practice, including but not limited to:
 - a. ASOP No. 5, Incurred Health and Disability Claims
 - b. ASOP No. 8, Regulatory Filings for Health Benefits, Accident and Health Insurance, and Entities Providing Health
 - c. ASOP No. 12, Risk Classification
 - d. ASOP No. 23, Data Quality
 - e. ASOP No. 25, Credibility Procedures Applicable to Accident and Health, Group Term Life, and Property/Casualty Coverages
 - f. ASOP No. 26, Compliance with Statutory and Regulatory Requirements for the Actuarial Certification of Small Employer Health Benefit Plans
 - g. ASOP No. 41, Actuarial Communications
 - h. ASOP No. 50, Determining Minimum Value and Actuarial Value under the Affordable Care Act
2. The Projected Index Rate is:
 - a. In compliance with all applicable State and Federal Statutes and Regulations (45 CFR 156.80(d)(1) and 147.102),
 - b. Developed in compliance with the applicable Actuarial Standards of Practice,
 - c. Reasonable in relation to the benefits provided and the population anticipated to be covered,
 - d. Neither excessive, deficient, nor unfairly discriminatory.

3. The Index Rate and only the allowable modifiers as described in 45 CFR 156.80(d)(1) and 45 CFR 156.80(d)(2) were used to generate plan-level rates.
4. Adjustments to the MAIR for benefits the plan offers in addition to essential health benefits included in Worksheet 2, Section III were calculated in accordance with actuarial standards of practice.
5. The geographic rating factors reflect only differences in the costs of delivery (which include unit costs and provider practice pattern differences) and do not include differences for population morbidity by geographic area.
6. The AV Calculator was used to determine the AV Metal Values shown in Worksheet 2 of the Part I Unified Rate Review Template for all plans. Adjustments made to reflect benefit features not handled by the AV Calculator are discussed in the attached certification required by 45 CFR Part 156, §156.135.

May 2, 2022

Aetna Health Inc.

Date

State:	District of Columbia	Filing Company:	Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN VA WV
TOI/Sub-TOI:	HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO		
Product Name:	2023 DC AHI SG HMO		
Project Name/Number:	2023 Exchange - Aetna/HMO		

Supporting Document Schedules

Bypassed - Item:	Actuarial Justification
Bypass Reason:	This is not a new form filing.
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Certificate of Authority to File
Bypass Reason:	The filing is being made by Aetna.
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Cover Letter
Comments:	
Attachment(s):	DC SG SHOP Cover Letter - AHI 1Q23.pdf
Item Status:	
Status Date:	

Bypassed - Item:	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)
Bypass Reason:	This is not a P & C Filing.
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	District of Columbia and Countrywide Loss Ratio Analysis (P&C)
Bypass Reason:	This is not a P & C Filing.
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	District of Columbia Plain Language Summary
Comments:	
Attachment(s):	DISB Plain Language Summary - AHI - 1Q2023.pdf
Item Status:	
Status Date:	

State:	District of Columbia	Filing Company:	Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN VA WV
TOI/Sub-TOI:	HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO		
Product Name:	2023 DC AHI SG HMO		
Project Name/Number:	2023 Exchange - Aetna/HMO		

Satisfied - Item:	DISB Actuarial Memorandum Dataset
Comments:	
Attachment(s):	DISB Actuarial Memo Dataset 2023_AHI.xlsx
Item Status:	
Status Date:	

Satisfied - Item:	Supporting Documentation
Comments:	
Attachment(s):	AV Certification_2023_DC AHI.pdf Exhibit A-1 - AHI Rate Change by plan_2023.pdf Exhibit 12 - AHI Key Factors_1Q2023.pdf DISB Filing Checklist - AHI 2023.pdf Exhibit A-2 - AV Screenshoots_2023 AHI.pdf DC_SG_73987_Part_III_Exhibits_1Q2023_AHI.pdf DC_SG_73987_Part_III_Exhibits_1Q2023_AHI.xlsx DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf
Item Status:	
Status Date:	

SERFF Tracking #:	AETN-133232225	State Tracking #:		Company Tracking #:	DCAHISG2023
State:	District of Columbia	Filing Company:	Aetna Health Inc. PA AZ DC DE IN KY MA MD NV NC OK TN VA WV		
TOI/Sub-TOI:	HOrg02G Group Health Organizations - Health Maintenance (HMO)/HOrg02G.004F Small Group Only - HMO				
Product Name:	2023 DC AHI SG HMO				
Project Name/Number:	2023 Exchange - Aetna/HMO				

Attachment DISB Actuarial Memo Dataset 2023_AHI.xlsx is not a PDF document and cannot be reproduced here.

Attachment DC_SG_73987_Part_III_Exhibits_1Q2023_AHI.xlsx is not a PDF document and cannot be reproduced here.



151 Farmington Ave.
Hartford, CT 06105

May 2, 2022

Mr. Efren Tanhehco
Supervising Actuary
District of Columbia Department of Insurance & Securities Regulation
810 First Street NE, 6th Floor
Washington, DC 20002

Subject: Aetna Health, Inc. - NAIC Number 95109
Small Group Premium Rate Filing – DC On Exchange
Effective dates January 1, 2023 – December 31, 2023

Dear Mr. Tanhehco:

I am writing to request approval of the attached Rate Filing for plans offered to Small Groups by Aetna Health, Inc. sold on the DC Exchange. This filing is for effective dates January 1, 2023 – December 31, 2023. This filing contains the benefit plans and rating methodology. The average rate revision proposed is a decrease of -7.03%.

The requested rates have been developed incorporating consideration of the market changes and rating requirements taking effect in the Small Group Market and conforms to the benefit plan provisions required by the Patient Protection and Affordable Care Act (P.L. 111-148) of 2010. Additionally, these health benefit plans conform to each respective tier of coverage, defined as Bronze, Silver, and Gold.

This filing is for Aetna's Small Group HMO Medical Expense coverage.

The following supporting documentation is also included:

- 1) An Actuarial Certification
- 2) An Actuarial Memorandum including supporting exhibits and documentation

The forms filing has been submitted under separate cover and the SERFF Filing ID # is AETN-133139939.

The purpose of this rate filing is to comply with regulatory rate filing requirements. This filing is not intended to be used for other purposes. If you need additional information, please contact me by telephone at 860-273-0099, or via e-mail at KluzaJ@aetna.com.

Sincerely,

A handwritten signature in cursive script that reads "Joanna Kluza".

Joanna Kluza, ASA, MAAA

Certificate Form Names and Numbers

<i>Form Name</i>	<i>Form Number</i>
HI DC SG HHIXCOC V007	HI SG HCOC-2023 07-HIX
Policy	HI SG HGrpAg-1A 01

Schedule Form Names and Numbers

<i>Form Name</i>	<i>Form Number</i>
HI DC SG HHIX COC V007	HI DC SG HIX SOB HMO 14050623
HI DC SG HHIX COC V007	HI DC SG HIX SOB HMO 14050620
HI DC SG HHIX COC V007	HI DC SG HIX SOB HMO 14051070
HI DC SG HHIX COC V007	HI DC SG HIX SOB HMO 14050626
HI DC SG HHIX COC V007	HI DC SG HIX SOB HMO 14051071
HI DC SG HHIX COC V007	HI DC SG HIX SOB HMO 14051069
HI DC SG HHIX COC V007	HI DC SG HIX SOB HMO 14050621

Rate Filing Justification Part II (Plain Language Summary)

Pursuant to 45 CFR 154.215, health insurance issuers are required to file Rate Filing Justifications. Part II of the Rate Filing Justification for rate increases and new submissions must contain a written description that includes a simple and brief narrative describing the data and assumptions that were used to develop the proposed rates. The Part II template below must be filled out and uploaded as an Adobe PDF file under the Consumer Disclosure Form section of the Supporting Documentation tab.

Name of Company Aetna Health, Inc.
 SERFF tracking number AETN-133232225
 Submission Date May 2, 2022
 Product Name DC AHI HMO SG 2023
 Market Type ☐ Individual ☒ Small Group
 Rate Filing Type ☒ Rate Increase ☐ New Filing

Scope and Range of the Increase:

The -7.0% increase is requested because:

Rates are updated to reflect the impact of medical trend, revisions to our assumptions about population morbidity and projected population, changes in cost sharing levels to ensure compliance with Actuarial Value requirements, and changes in provider networks and contracts.

This filing will impact:

of policyholder's 40

of covered lives 62

The average, minimum and maximum rate changes increases are:

- Average Rate Change: The average premium change, by percentage, across all policy holders if the filing is approved -7.0%
- Minimum Rate Change: The smallest premium increase (or largest decrease), by percentage, that any one policy holder would experience if the filing is approved -13.1%
- Maximum Rate Change: The largest premium increase, by percentage, that any one policy holder would experience if the filing is approved -2.2%

Individuals within the group may vary from the aggregate of the above increase components as a result of:

the benefit plan the individual chooses, when the member's group contract renews, the age and family size and age for enrolling employees and employer contributions.

Financial Experience of Product

The overall financial experience of the product includes:

The 2021 experience generated by the plans offered under this product produced a loss ratio that was unfavorable to the target loss ratio before but favorable after risk adjustment. Due to the low volume of members that have enrolled in these plans the 2021 experience is not credible.

The rate increase will affect the projected financial experience of the product by:

The rate revision is not expected to impact the profitability of the product. That is, the target profit margin is unchanged.

Components of Increase

The request is made up of the following components:

Trend Increases – -195 % of the -7.0% total filed increase

1. Medical Utilization Changes – Defined as the increase in total plan claim costs not attributable to changes in the unit cost of underlying services, or renegotiation of provider contracts. Examples include changes in the mix of services utilized, or an increase/decrease in the frequency of service utilization.

This component is -105 % of the -7.0% total filed increase.

2. Medical Price Changes – Defined as the increase in total plan claim costs attributable to changes in the unit cost of underlying services, or renegotiation of provider contracts.

This component is -89. % of the -7.0% total filed increase.

Other Increases – 295. % of the -7.0% total filed increase

1. Medical Benefit Changes Required by Law – Defined as any new mandated plan benefit changes, as mandated by either State or Federal Regulation.

This component is -112% of the -7.0% total filed increase.

2. Medical Benefit Changes Not Required by Law – Defined as changes in plan benefit design made by the company, which are not required by either State or Federal Regulation.

This component is 0 % of the -7.0% total filed increase.

3. Changes to Administration Costs – Defined as increases in the costs of providing insurance coverage. Examples include claims payment expenses, distribution costs, taxes, and general business expenses such as rent, salaries, and overhead.

This component is -3.7% of the -7.0% total filed increase.

4. Changes to Profit Margin – Defined as increases to company surplus or changes as an additional margin to cover the risk of the company.

This component is 9.03 % of the -7.0% total filed increase.

5. Other – Defined as:

Changes in commission, benefit slope, risk adjustment, provider contracting, experience and population risk.

This component is 402. % of the -7.0% total filed increase.

Actuarial Value Certification

State:	DC
Plan Year:	2023
HIOS Issuer ID:	73987
HIOS Product Ids:	73987DC004
HIOS Plan Ids:	73987DC0040061 73987DC0040058 73987DC0040057 73987DC0040029

Per 156.135, the AV must be certified by a member of the American Academy of Actuaries using generally accepted actuarial principles and methodologies. There are 3 types of certification:

- (1) Option 1 - Certify that the plan was entered correctly and does not vary materially from standard options entered
- (2) Option 2 - Certify that entries into the calculator were modified to reflect the plan appropriately [156.135.(b).(2)]
- (3) Option 3 - Used the calculator for provisions that fit and made adjustment for plan design features that deviate outside of calculator [156.135.(b).(3)]

The plans listed meet the criteria for Option 1 - the plans were entered correctly and do not vary materially from the standard options entered. In addition, a 0.9999 factor is applied to the average coinsurance in row 11 for most plans. While not materially impacting the entered benefit value, this methodology prevents the OP facility/physician splitting methodology from being invoked which we do not believe is appropriate for our benefit plans. The output from this consistently-applied process reflects our certified Actuarial Values.


Certification Language:
The development of the actuarial value was determined in accordance with the ASOPs established by the ASB and with applicable laws and regulations.

This analysis was conducted by a member of the American Academy of Actuaries that meets the Qualification Standards for Actuaries Issuing Statements of Actuarial Opinion in the United States promulgated by the American Academy of Actuaries, and has the education and experience necessary to perform the work.

The certifying actuary is an employee of Aetna.

This certification supports plans offered in the Small Group market.

Metal levels were appropriately assigned based on applicable law.

Actuary Signature:	
Actuary Printed name:	Joanna Kluza, ASA, MAAA
Date:	5/2/2023

Unique Plan Design - Issuer Actuarial Value
Supporting Documentation and Justification

State:	DC
Plan Year:	2023
HIOS Issuer ID:	73987
HIOS Product Ids:	73987DC004

HIOS Plan Ids:	73987DC0040060
	73987DC0040046
	73987DC0040017

1) Justification for use of Issuer AV:

Per 156.135, the AV must be certified by a member of the American Academy of Actuaries using generally accepted actuarial principles and methodologies. There are 3 types of certification:

- (1) Option 1 - Certify that the plan was entered correctly and does not vary materially from standard options entered
- (2) Option 2 - Certify that entries into the calculator were modified to reflect the plan appropriately [156.135.(b).(2)]
- (3) Option 3 - Used the calculator for provisions that fit and made adjustment for plan design features that deviate outside of calculator [156.135.(b).(3)]

Aetna benefit plans were analyzed vs the AVC to determined when Option 2 and/or Option 3 vs Option 1 certification was necessary. Four underlying calculators were built to support population of the Mental Health OP, Specialist OV, ER, and Rx generic rows in the AVC. These all support Option 2 certifications, but only the calculators used are referenced below. A separate calculator was used for plans with True Individual Family (TIF) deductibles in support of Option 3. Again, only if the calculator was used would it be referenced below. In addition, a 0.9999 factor is applied to the average coinsurance in row 11 for most plans. While not materially impacting the entered benefit value, this methodology prevents the OP facility/physician splitting methodology from being invoked which we do not believe is appropriate for our benefit plans. The output from this consistently-applied process reflects our certified Actuarial Values.

2) Regulatory permitted alternate method used:

(2) Option 2 - Certify that entries into the calculator were modified to reflect the plan appropriately [156.135.(b).(2)]
73987DC0040060
73987DC0040017
(3) Option 3 - Used calculator for provisions that fit and made adjustment for plan design features that deviate outside of calculator [156.135.(b).(3)]
73987DC0040046

3) Confirmation that only in-network cost sharing including multitier networks, was considered:

Confirmed. Only in-network cost sharing information was used.

4) Description of standardized plan population data used:

Detail of data used for each of the subcalculators is described below in items 5 & 6. All data was based on either the AVC continuance tables, or a national data set which is representative of the SG population

5) If the method described in 156.135.(b).(2) was used, description of how the benefits were modified to fit the parameters of the AV calculator:

73987DC0040060
73987DC0040017

MH OP Benefit Plan Fit Process

MH OP has two subcategories: MH OP - Office Visit and MH OV - All Other. The equivalent coinsurance for each was set as the plan copay divided by the unit cost. The adjusted equivalent coinsurance was then calculated for each copay/deductible combination. If there was non-uniform deductible applicability, the equivalent coinsurance was calculated that produced the same net impact as assuming both subcategories had no deductible apply. This was based on the distribution of claims cost from the AVC continuance tables, adjusted to take into account the impact of the OOP Max. The average coinsurance of the row was calculated based on the weightings of the internal subcategories. This coinsurance was then converted to a copay based on the average unit cost from the aforementioned continuance tables.

73987DC0040017

ER Benefit Plan Fit Process

Where both an ER copay and coinsurance exist, we calculated a coinsurance equivalent amount. The copay visit costs were converted to equivalent coinsurance using the AVC continuance table average unit costs. The copay equivalent coinsurance was then multiplied by the actual coinsurance as the aggregate equivalent coinsurance.

6) If the method described in 156.135.(b).(3) was used, description of the data and method used to develop the adjustments:

73987DC0040046

TIF (True individual family) Deductible

For plans with a TIF deductible, the average change in paid to allowed due to this feature was determined based on internal cost data and a SG appropriate distribution of single vs family members. That process produces an additive adjustment to the AV obtained via the methodology described above in support of 156.135.(b).(2) certifications.

Certification Language:


The development of the actuarial value was determined in accordance with the ASOPs established by the ASB and with applicable laws and regulations.

This analysis was conducted by a member of the American Academy of Actuaries that meets the Qualification Standards for Actuaries Issuing Statements of Actuarial Opinion in the United States promulgated by the American Academy of Actuaries, and has the education and experience necessary to perform the work.

The certifying actuary is an employee of Aetna.

This certification supports plans offered in the Small Group market.

Metal levels were appropriately assigned based on applicable law.

Actuary Signature: 
Actuary Printed name: Joanna Kluza, ASA, MAAA
Date: 5/2/2023

Aetna Health Inc. (a PA corp.)
HIOS ISSUER ID: 73987

Exhibit A-1
Rate Change by Plan

2022 HIOS Plan ID	2022 Plan Name	1Q2022 Premium Rate	2023 HIOS Plan ID	2023 Plan Name	1Q2023 Premium Rate	Rate Change
73987DC0040017	DC Gold HNOOnly 70% \$25/40 E	\$575.23	73987DC0040017	DC Gold HNOOnly 70% \$25/70 E	\$501.64	-12.8%
73987DC0040021	DC Gold HNOOnly 500 90% \$25/40 E	\$556.02	73987DC0040061	DC Gold HNOOnly 500 80% \$25/50 E M	\$520.50	-6.4%
73987DC0040029	DC Silver HNOOnly 3000 100% HSA E	\$454.15	73987DC0040029	DC Silver HNOOnly 3000 100% HSA E	\$392.64	-13.5%
73987DC0040046	DC Gold HNOOnly 1650 100% HSA T	\$506.30	73987DC0040046	DC Gold HNOOnly 1650 100% HSA T	\$485.08	-4.2%
73987DC0040056	DC Bronze HNOOnly 6000 80% \$15/50 E	\$343.05	73987DC0040060	DC Bronze HNOOnly 7500 60% \$45/105 E M	\$304.23	-11.3%
73987DC0040057	DC Silver HNOOnly 4800 80% \$25/45 E	\$397.70	73987DC0040057	DC Silver HNOOnly 4850 80% \$40/80 E M	\$382.56	-3.8%
73987DC0040058	DC Gold HNOOnly 1500 90% E	\$521.93	73987DC0040058	DC Gold HNOOnly 1500 90% E	\$490.38	-6.0%

Aetna Health Inc. (a PA corp.)
HIOS ISSUER ID: 73987

Exhibit 12
Comparison of Key Pricing Factors to LY (2021) Pricing

Category	2022	2023	% Impact to Premium	Description
Base Experience PMPM*	\$359.55	\$489.23	22.2%	Using all SG experience (HMO/PPO) from DC (12%) and IH (88%)
Pricing Trend (annual)	8.4%	10.7%	13.8%	Using previously approved trend
Morbidity	1.00	1.00	0.3%	No material change projected
Benefit	1.018	1.089	7.9%	Richer portfolio in 2023 compared to 2022
Demographic	1.008	0.964	-4.5%	Expecting shift upward in age/gender mix
Area Factor	1.000	1.000	0.0%	No Change
Other	0.977	0.964	-2.3%	Ben Chg, Ded Supp, etc.
Network Change	1.064	1.063	2.3%	Adj to normalize experience for manual pricing
Risk Adjustment	-\$16.99	\$235.25	-43.1%	2023 Projection based on Wakely 2021 Accruals
Projected Claim Cost	\$466.01	\$410.95	-3.5%	
% of Premium Items				
Admin	8.8%	10.2%	0.3%	
Profit	6.0%	6.0%	-0.6%	
FIT	1.26%	1.26%	-0.1%	
AFIT	4.74%	4.74%	-0.5%	
Taxes & Fees	5.5%	5.3%	-0.8%	
Commissions	1.2%	1.3%	-0.1%	
Prem Tax	3.4%	3.1%	-0.6%	
HIF	0.0%	0.0%	0.0%	
Federal EUF	0.8%	0.8%	-0.1%	Assuming State Exchange User Fee of 0.825%
State EUF	0.0%	0.0%	0.0%	N/A
Risk Adjustment User Fee	0.1%	0.1%	0.0%	No material change
Total % of Prem	20.32%	21.43%		
Single Risk Pool Premium	\$584.92	\$523.05	-10.6%	Plan Adjusted Markedt Index Rate - Wksht II Field # 3.10
SG Trend Factor	1.008	1.010	0.3%	
Index Rate	\$589.38	\$528.49		
<u>Calibration Factors</u>				
Trend	1.008	1.010		
Age	1.111	1.043		
Area	1.000	1.000		
Tobacco	1.000	1.000		
Avg 1.0 Premium	\$526.35	\$501.57		Calibrated Plan Ajusted Index Rate - Wksht II Field # 3.14
Remove trend factor	\$522.37	\$496.41		
Consumer Premium Relativity	0.819	0.934		
Avg Prem	\$427.73	\$463.77	8.4%	
Premium Mix	1.407	1.207	-14.3%	
Avg Projection Period Premium	\$602.02	\$559.70	-7.0%	Ties back to Wksht II Field # 1.13

Footnotes

*Base Experience PMPM for 2022 is 2020 Claims experience used for pricing LY with 1 year of trend to bring the claim level to 2021
 *Base Experience PMPM for 2023 is 2021 Claims experience

Aetna Health Inc. (a PA corp.)
HIOS ISSUER ID: 73987
Rate Change by Plan - Annual

[illegible]

**RATE FILING REQUIREMENTS INDIVIDUAL AND SMALL GROUP
PLANS SOLD ON DC HEALTH LINK
CHECK-LIST**

INSTRUCTIONS: Include all required elements in the table below with the filed rates. The data elements listed in the Actuarial Memorandum should be consistent with the cover letter, if applicable.

Number	Data Element	Requirement Description	Individual and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
1	Purpose of Filing	State the purpose of the filing. Identify the applicable law. List the proposed changes to the base rates and rating factors, and provide a general summary.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 1
2	Form Numbers	Form numbers should be listed in the actuarial memorandum.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 11
3	HIOS Product ID	The HIOS product ID should be listed in the actuarial memorandum.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 1
4	Effective Date	The requested effective date of the rate change. For filings effective 1/1/2017 and later, follow filing due date requirements.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 1
5	Market	Indicate whether the products are sold in the individual or small employer group market.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 1
6	Status of Forms	Indicate whether the forms are open to new sales, closed, or a mixture of both, and whether the forms are grandfathered, non- grandfathered, or a mixture of both.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 1
7	Benefits/Metal level(s)	Include a basic description of the benefits of the forms referenced in the filing and the metal level of each plan design.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 1-2
Number	Data Element	Requirement Description	Individual and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
7.1	AV Value	Provide the actuarial value of each plan design using the AV calculator developed and made available by HHS.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 1-2, Exhibit A
8	Average Rate Increase Requested	The weighted average rate increase being requested, incremental and year-over-year renewal. The weights should be based on premium volume. In the small group market, please also provide weighted average rate increase requested for 2023Q1 over 2022Q1; etc.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 2
9	Maximum Rate Increase Requested	The maximum rate increase that could be applied to a policyholder based on changes to the base rate and rating factors, incremental and year-over-year renewal. (Does not include changes in the demographics of the covered members.)	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 2
10	Minimum Rate Increase Requested	The minimum rate increase that could be applied to a policyholder based on changes to the base rate and rating factors, incremental and year-over-year renewal. (Does not include changes in the demographics of the covered members.)	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 2
11	Absolute Maximum Premium Increase	The absolute maximum year-over-year renewal rate increase that could be applied to a policyholder, including demographic changes such as aging.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 2
12	Average Renewal Rate Increase for a Year	Calculate the average renewal rate increase, weighted by written premium, for renewals in the year ending with the effective period of the rate filing. The calculation must be performed for each HIOS product ID.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 2

Number	Data Element	Requirement Description	Individual and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
13	Rate Change History	Rate change history of the forms referenced in the filing. If nationwide experience is used in developing the rates, provide separately the rate history for District of Columbia and the nationwide average rate history.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 2
14	Exposure	Current number of policies, certificates and covered lives.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 3
15	Member Months	Number of members in force during each month of the base experience period used in the rate development and in each of the two preceding twelve-month periods.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 3
16	Past Experience	Provide monthly earned premium and incurred claims for the base experience period used in the rate development and each of the two preceding twelve-month periods.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 3, 10
17	Index Rate	Provide the index rate.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 3
17.1	Rate Development	Show base experience used to develop rates and all adjustments and assumptions applied to arrive at the requested rates. For less than fully credible blocks, disclose the source of the base experience data used in the rate development and discuss the appropriateness of the data for pricing the policies in the filing.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 3-5
18	Credibility Assumption	If the experience of the policies included in the filing is not fully credible, state and provide support for the credibility formula used in the rate development.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 5
19	Trend Assumption	Show trend assumptions by major types of service as defined by HHS in the Part I Preliminary Justification template, separately by unit cost, utilization, and in total. Provide the development of the trend assumptions.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 5-6
20	Cost-Sharing Changes	Disclose any changes in cost sharing for the plans between the base experience period for rating and the requested effective date. Show how the experience has been adjusted for cost- sharing changes in the rate development. Provide support for the estimated cost impact of the cost-sharing changes.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 6
21	Benefit Changes	Disclose any changes in covered benefits for the plans between the base experience period for rating and the requested effective date. Show how the experience has been adjusted for changes in covered benefits in the rate development. Provide support for the estimated cost impact of the benefit changes.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 6

Number	Data Element	Requirement Description	Individual and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
22	Plan Relativities	For rate change filings, if the rate change is not uniform for all plan designs, provide support for all requested rate changes by plan design. Disclose the minimum, maximum, and average impact of the changes on policyholders. For initial filings, provide the derivation of any new plan factors.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 6
23	Rating Factors	Provide the age and other rating factors used. Disclose any changes to rating factors, and the minimum, maximum, and average impact on policyholders. Provide support for any changes.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 6, Exhibit 3, Exhibit 7, Exhibit 11
23.1	Wellness Programs	Describe any wellness programs (as defined in section 2705(j) of the PHS Act) included in this filing.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 7
24	Distribution of Rate Increases	Anticipated distribution of rate increases due to changes in base rates, plan relativities, and rating factors. This need not include changes in demographics of the individual or group.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 7, Exhibit A-1
25	Claim Reserve Needs	Provide the claims for the base experience period separately for paid claims, and estimated incurred claims (including claim reserve). Indicate the incurred period used for the base period. Indicate the paid-through date of the paid claims, and provide a basic description of the reserving methodology for claims reserves and contract reserves, if any. Provide margins used, if any.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 7
26	Administrative Costs of Programs that Improve Health Care Quality	Show the amount of administrative costs included with claims in the numerator of the MLR calculation . Show that the amount is consistent with the most recently filed Supplemental Health Care Exhibit or provide support for the difference.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 7
Number	Data Element	Requirement Description	Individual/and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
27	Taxes and Licensing or Regulatory Fees	Show the amount of taxes, licenses, and fees subtracted from premium in the denominator of your medical loss ratio calculation(c). Show that the amount is consistent with the most recently filed Supplemental Health Care Exhibit or provide support for the difference.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 7, Exhibit 6
28	Medical Loss Ratio (MLR)	Demonstrate that the projected loss ratio, including the requested rate change, meets the minimum MLR. Show the premium, claims, and adjustments separately with the development of the projected premium and projected claims (if not provided in the rate development section). If the loss ratio falls below the minimum for the subset of policy forms in the filing, show that when combined with all other policy forms in the market segment in District of Columbia, the loss ratio meets the minimum.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 7, Exhibit 6

Number	Data Element	Requirement Description	Individual and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
29	Risk Adjustment	Provide rate information relating to the Risk Adjustment program. Information should include assumed Risk Adjustment user fees, Risk Adjustment PMPM excluding user fees and assumed distribution of enrollment by risk score, plan, and geographical area. Provide support for the assumptions, including any demographic changes. Provide information/study on the development of risk scores and Risk Adjustment PMPM. Provide previous year-end estimated risk adjustment payable or receivable amount and quantitative support for the amount.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 8
30	Past and Prospective Loss Experience Within and Outside the State	Indicate whether loss experience within or outside the state was used in the development of proposed rates. Provide an explanation for using loss experience within or outside the state.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 9
31	A Reasonable Margin for Reserve Needs	Show the assumed Margin for Reserve Needs used in the development of proposed rates. Margin for Reserve Needs includes factors that reflect assumed contributions to the company's surplus or the assumed profit margin. Demonstrate how this assumption was derived, how the assumption has changed from prior filings, and provide support for changes. If the assumption for Qualified Health Plans exceeds 3% as assumed in the risk corridor formula, justify the excess in light of the company's surplus position.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 8, Exhibit 5
Number	Data Element	Requirement Description	Individual and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
32	Past and Prospective Expenses	Indicate the expense assumptions used in the development of proposed rates. Demonstrate how this assumption was derived. Show how this assumption has changed from prior filings, and provide support for any change. Provide the assumed administrative costs in the following categories: <ul style="list-style-type: none"> • Salaries, wages, employment taxes, and other employee benefits • Commissions • Taxes, licenses, and other regulatory fees • Cost containment programs / quality improvement activities • All other administrative expenses • Total 	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 8, Exhibit 5
33	Any Other Relevant Factors Within and Outside the State	Show any other relevant factors that have been considered in the development of the proposed rates. Demonstrate how any related assumptions were derived. Show how these assumptions have changed from prior filings, and provide support for any change.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 8
34	Other	Any other information needed to support the requested rates or to comply with Actuarial Standard of Practice No. 8.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHI.pdf- pg 9

Number	Data Element	Requirement Description	Individual and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
35	Actuarial Certification	Signed and dated certification by a qualified actuary that the anticipated loss ratio meets the minimum requirement, the rates are reasonable in relation to benefits, the filing complies with the laws and regulations of the District of Columbia and all applicable Actuarial Standards of Practice, including ASOP No. 8, and that the rates are not unfairly discriminatory.	Yes	DC_SG_State_Actuarial_Memo_1Q2023_AHL.pdf- pg 9
36	Part I Preliminary Justification (Grandfathered Plan Filings)	Rate Summary Worksheet --- Provide this document with all Grandfathered plan filings. Provide in Excel and PDF format.	N/A	N/A
36.1	Unified Rate Review Template (Non-Grandfathered Filings)	Unified Rate Review Template as specified in the proposed Federal Rate Review regulation. Provide this document with all Non-Grandfathered plan filings. Provide in Excel and PDF format.	Yes	Supporting Documentaion
37	Part II Preliminary Justification	Written description justifying the rate increase as specified by 45 CFR § 154.215(f). Provide for <i>all</i> individual and small employer group filings (whether or not they are “subject to review” as defined by HHS).	Yes	Supporting Documentation
38	DISB Actuarial Memorandum Dataset	Summarizes data elements contained in Actuarial Memorandum. Provide this document with all Non-Grandfathered plan filings. Provide in Excel format only.	Yes	Supporting Documentation
39	District of Columbia Plain Language Summary	Similar to the Part II Preliminary Justification, this is a written description of the rate increase as specified by 45 CFR § 154.215, but as a simple and brief narrative describing the data and assumptions that were used to develop the proposed rates. Provide this document for all individual and small employer group filings.	Yes	Supporting Documentation
40	Summary of Components for Requested Rate Change	DISB will require that issuers provide a chart listing a) any and all components of requested rate changes from the prior year; b) a quick summary/explanation of the change; and c) the actual percentage impact of the change for each component, such that the total for all components listed equals the total percentage change requested for the plan year.	Yes	Supporting Documentation

Number	Data Element	Requirement Description	Individual and Small Group	
			Has the Data Element Been Included?	Location of the Data Element
41	CCIO Risk Adjustment Transfer Elements Extract (RATE 'E')	Received directly from CCIO; this report should be completed and submitted by the set deadline for QHP submissions, or by April 30th of the current year, whichever is first.	N/A	N/A
42	Additional Requirements for Stand-Alone Dental Plan Filings	Provide the following for stand-alone dental plan filings: <ul style="list-style-type: none"> • Identification of the level of coverage (i.e. low or high), including the actuarial value of the plan determined in accordance with the proposed rule; • Certification of the level of coverage by a member of the American Academy of Actuaries using generally accepted actuarial principles; and • Demonstration that the plan has a reasonable annual limitation on cost-sharing. 	N/A	N/A

CERTIFYING SIGNATURE

The undersigned representative of the organization submitting this rate filing attests that all items contained in the above checklist have been included in the filing to the best of the company's ability.

Joanna Kluza, ASA, MAAA

(Print Name)



(Signature)

DC Gold HNOOnly 1650 100% HSA T

Actuarial Value Snapshot

The Actuarial Value Calculator (AV Calculator) is designed to give an estimate of network liability for a given plan design. This build of the AV Calculator uses data from a large national commercial database to build continuance tables by metal tier.

User Inputs for Plan Parameters

- ☒ Use Integrated Medical and Drug Deductible?
☐ Apply Inpatient Copay per Day?
☐ Apply Skilled Nursing Facility Copay per Day?
☐ Use Separate MOOP for Medical and Drug Spending?
☐ Indicate if Plan Meets CSR or Expanded Bronze AV Standard?
 Desired Metal Tier: Gold

HSA/HRA Options	Tiered Network Option
HSA/HRA Employer Contribution? <input type="checkbox"/>	Tiered Network Plan? <input type="checkbox"/>
Annual Contribution Amount:	1st Tier Utilization: 2nd Tier Utilization:

Tier 1 Plan Benefit Design			Tier 2 Plan Benefit Design		
Medical	Drug	Combined	Medical	Drug	Combined
		\$1,650.00			
		90.00%			
		\$7,000.00			

[Click Here for Important Instructions](#)

Type of Benefit	Tier 1				Tier 2				Tier 1	Tier 2
	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Copay applies only after deductible?	
Medical	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Emergency Room Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
All Inpatient Hospital Services (inc. MH/SUD)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialist Visit	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Mental/Behavioral Health and Substance Use Disorder Outpatient Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Imaging (CT/PET Scans, MRIs)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Speech Therapy	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Occupational and Physical Therapy	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preventive Care/Screening/Immunization	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Laboratory Outpatient and Professional Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
X-rays and Diagnostic Imaging	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Skilled Nursing Facility	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Surgery Physician/Surgical Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Drugs	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Generics	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$12.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$55.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Non-Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$95.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialty Drugs (i.e. high-cost)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	60%		<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

Options for Additional Benefit Design Limits:

Set a Maximum on Specialty Rx Coinsurance Payments?	<input checked="" type="checkbox"/>
Specialty Rx Coinsurance Maximum:	\$150
Set a Maximum Number of Days for Charging an IP Copay?	<input type="checkbox"/>
# Days (1-10):	
Begin Primary Care Cost-Sharing After a Set Number of Visits?	<input type="checkbox"/>
# Visits (1-10):	
Begin Primary Care Deductible/Coinsurance After a Set Number of Copays?	<input type="checkbox"/>
# Copays (1-10):	

Plan Description:

Name: DC Gold HNOOnly 1650 100% HSA T
Plan HIOS ID: 73987DC0040046
Issuer HIOS ID: 73987
AVC Version: 2023_1e

Output

Status/Error Messages:

Actuarial Value: 82.35%

Metal Tier:

NOTE: Service-specific cost-sharing is applying for service(s) with fac/prof components, overriding outpatient inputs for those service(s).

Additional Notes:

Calculation Time:

0.0703 seconds

Draft 2023 AV Calculator

Option 3 Additive TIF adj

-1.00%

Final AV

81.35%

This product, DC Gold HNOOnly 1650 100% HSA T, satisfies the HHS guidelines for a Gold plan with an Actuarial Value of 81.35%

DC Silver HNOnly 3000 100% HSA E

Actuarial Value Snapshot

The Actuarial Value Calculator (AV Calculator) is designed to give an estimate of network liability for a given plan design. This build of the AV Calculator uses data from a large national commercial database to build continuance tables by metal tier.

User Inputs for Plan Parameters

- ☒ Use Integrated Medical and Drug Deductible?
☐ Apply Inpatient Copay per Day?
☐ Apply Skilled Nursing Facility Copay per Day?
☐ Use Separate MOOP for Medical and Drug Spending?
☐ Indicate if Plan Meets CSR or Expanded Bronze AV Standard?

Desired Metal Tier: **Silver**

HSA/HRA Options	Tiered Network Option
HSA/HRA Employer Contribution? <input type="checkbox"/>	Tiered Network Plan? <input type="checkbox"/>
Annual Contribution Amount:	1st Tier Utilization: 2nd Tier Utilization:

Tier 1 Plan Benefit Design		
Medical	Drug	Combined
		\$3,000.00
		90.00%
		\$7,000.00

Tier 2 Plan Benefit Design		
Medical	Drug	Combined

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Type of Benefit	Tier 1				Tier 2				Tier 1	Tier 2
	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Copay applies only after deductible?	
Medical	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Emergency Room Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$750.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
All Inpatient Hospital Services (inc. MH/SUD)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$40.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Specialist Visit	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$80.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mental/Behavioral Health and Substance Use Disorder Outpatient Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Imaging (CT/PET Scans, MRIs)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Speech Therapy	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$80.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Occupational and Physical Therapy	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$80.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Preventive Care/Screening/Immunization	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Laboratory Outpatient and Professional Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$10.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
X-rays and Diagnostic Imaging	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$10.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Skilled Nursing Facility	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Surgery Physician/Surgical Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Drugs	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Generics	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$12.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$55.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Non-Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$95.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Specialty Drugs (i.e. high-cost)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	60%		<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

Options for Additional Benefit Design Limits:

Set a Maximum on Specialty Rx Coinsurance Payments?	<input checked="" type="checkbox"/>
Specialty Rx Coinsurance Maximum:	\$150
Set a Maximum Number of Days for Charging an IP Copay?	<input type="checkbox"/>
# Days (1-10):	
Begin Primary Care Cost-Sharing After a Set Number of Visits?	<input type="checkbox"/>
# Visits (1-10):	
Begin Primary Care Deductible/Coinsurance After a Set Number of Copays?	<input type="checkbox"/>
# Copays (1-10):	

Plan Description:

Name: DC Silver HNOnly 3000 100% HSA E
Plan HIOS ID: 73987DC0040029
Issuer HIOS ID: 73987
AVC Version: 2023_1e

Output

Calculate

Status/Error Messages:

Actuarial Value: 71.98%
Metal Tier: Silver

NOTE: Service-specific cost-sharing is applying for service(s) with fac/prof components, overriding outpatient inputs for those service(s).

Additional Notes:

Calculation Time: 0.0547 seconds

Draft 2023 AV Calculator

This product, DC Silver HNOnly 3000 100% HSA E, satisfies the HHS guidelines for a Silver plan with an Actuarial Value of 71.98%

DC Gold HNOOnly 70% \$25/70 E

Actuarial Value Snapshot

The Actuarial Value Calculator (AV Calculator) is designed to give an estimate of network liability for a given plan design. This build of the AV Calculator uses data from a large national commercial database to build continuance tables by metal tier.

User Inputs for Plan Parameters

- Use Integrated Medical and Drug Deductible? ☐
Apply Inpatient Copay per Day? ☐
Apply Skilled Nursing Facility Copay per Day? ☐
Use Separate MOOP for Medical and Drug Spending? ☐
Indicate if Plan Meets CSR or Expanded Bronze AV Standard? ☐

Desired Metal Tier: **Gold**

HSA/HRA Options	Tiered Network Option
HSA/HRA Employer Contribution? <input type="checkbox"/>	Tiered Network Plan? <input type="checkbox"/>
Annual Contribution Amount:	1st Tier Utilization: 2nd Tier Utilization:

Tier 1 Plan Benefit Design			Tier 2 Plan Benefit Design		
Medical	Drug	Combined	Medical	Drug	Combined
Deductible (\$)	\$0.00	\$0.00			
Coinsurance (%; Insurer's Cost Share)	70.00%	100.00%			
MOOP (\$)	\$9,000.00				
MOOP if Separate (\$)					

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Type of Benefit	Tier 1				Tier 2				Tier 1	Tier 2
	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Copay applies only after deductible?	
Medical	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Emergency Room Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	58%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
All Inpatient Hospital Services (inc. MH/SUD)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	70%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays)	<input type="checkbox"/>	<input type="checkbox"/>		\$25.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialist Visit	<input type="checkbox"/>	<input type="checkbox"/>		\$70.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Mental/Behavioral Health and Substance Use Disorder Outpatient Services	<input type="checkbox"/>	<input type="checkbox"/>		\$24.66	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Imaging (CT/PET Scans, MRIs)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	70%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Speech Therapy	<input type="checkbox"/>	<input type="checkbox"/>		\$70.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Occupational and Physical Therapy	<input type="checkbox"/>	<input type="checkbox"/>		\$70.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preventive Care/Screening/Immunization	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Laboratory Outpatient and Professional Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	70%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
X-rays and Diagnostic Imaging	<input type="checkbox"/>	<input checked="" type="checkbox"/>	70%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Skilled Nursing Facility	<input type="checkbox"/>	<input checked="" type="checkbox"/>	70%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	70%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Surgery Physician/Surgical Services	<input type="checkbox"/>	<input checked="" type="checkbox"/>	70%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Drugs	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Generics	<input type="checkbox"/>	<input type="checkbox"/>		\$12.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preferred Brand Drugs	<input type="checkbox"/>	<input type="checkbox"/>		\$55.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Non-Preferred Brand Drugs	<input type="checkbox"/>	<input type="checkbox"/>		\$95.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialty Drugs (i.e. high-cost)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	60%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

Options for Additional Benefit Design Limits:

Set a Maximum on Specialty Rx Coinsurance Payments?	<input checked="" type="checkbox"/>
Specialty Rx Coinsurance Maximum:	\$150
Set a Maximum Number of Days for Charging an IP Copay?	<input type="checkbox"/>
# Days (1-10):	
Begin Primary Care Cost-Sharing After a Set Number of Visits?	<input type="checkbox"/>
# Visits (1-10):	
Begin Primary Care Deductible/Coinsurance After a Set Number of Copays?	<input type="checkbox"/>
# Copays (1-10):	

Plan Description:

Name: DC Gold HNOOnly 70% \$25/70 E
Plan HIOS ID: 73987DC0040017
Issuer HIOS ID: 73987
AVC Version: 2023_1e

Output

Status/Error Messages:

Actuarial Value: 81.61%
Metal Tier: Gold

NOTE: Service-specific cost-sharing is applying for service(s) with fac/prof components, overriding outpatient inputs for those service(s).

Additional Notes:

Calculation Time: 0.0703 seconds

Draft 2023 AV Calculator

This product, DC Gold HNOOnly 70% \$25/70 E, satisfies the HHS guidelines for a Gold plan with an Actuarial Value of 81.61%

DC Gold HNOOnly 1500 90% E

Actuarial Value Snapshot

The Actuarial Value Calculator (AV Calculator) is designed to give an estimate of network liability for a given plan design. This build of the AV Calculator uses data from a large national commercial database to build continuance tables by metal tier.

User Inputs for Plan Parameters

- Use Integrated Medical and Drug Deductible? ☐
Apply Inpatient Copay per Day? ☐
Apply Skilled Nursing Facility Copay per Day? ☐
Use Separate MOOP for Medical and Drug Spending? ☐
Indicate if Plan Meets CSR or Expanded Bronze AV Standard? ☐

Desired Metal Tier: **Gold**

HSA/HRA Options	Tiered Network Option
HSA/HRA Employer Contribution? <input type="checkbox"/>	Tiered Network Plan? <input type="checkbox"/>
Annual Contribution Amount:	1st Tier Utilization: 2nd Tier Utilization:

Tier 1 Plan Benefit Design			Tier 2 Plan Benefit Design		
Medical	Drug	Combined	Medical	Drug	Combined
Deductible (\$)	\$1,500.00	\$0.00			
Coinsurance (%; Insurer's Cost Share)	90.00%	100.00%			
MOOP (\$)	\$8,150.00				
MOOP if Separate (\$)					

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Type of Benefit	Tier 1				Tier 2				Tier 1	Tier 2
	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Copay applies only after deductible?	
Medical	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Emergency Room Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$650.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
All Inpatient Hospital Services (inc. MH/SUD)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialist Visit	<input type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Mental/Behavioral Health and Substance Use Disorder Outpatient Services	<input type="checkbox"/>	<input type="checkbox"/>		\$0.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Imaging (CT/PET Scans, MRIs)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Speech Therapy	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$65.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Occupational and Physical Therapy	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$65.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Preventive Care/Screening/Immunization	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Laboratory Outpatient and Professional Services	<input type="checkbox"/>	<input type="checkbox"/>		\$15.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
X-rays and Diagnostic Imaging	<input type="checkbox"/>	<input type="checkbox"/>		\$65.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Skilled Nursing Facility	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	90%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$500.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Outpatient Surgery Physician/Surgical Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	100%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Drugs	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Generics	<input type="checkbox"/>	<input type="checkbox"/>		\$12.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preferred Brand Drugs	<input type="checkbox"/>	<input type="checkbox"/>		\$55.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Non-Preferred Brand Drugs	<input type="checkbox"/>	<input type="checkbox"/>		\$95.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialty Drugs (i.e. high-cost)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	60%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

Options for Additional Benefit Design Limits:

Set a Maximum on Specialty Rx Coinsurance Payments?	<input checked="" type="checkbox"/>
Specialty Rx Coinsurance Maximum:	\$150
Set a Maximum Number of Days for Charging an IP Copay?	<input type="checkbox"/>
# Days (1-10):	
Begin Primary Care Cost-Sharing After a Set Number of Visits?	<input type="checkbox"/>
# Visits (1-10):	
Begin Primary Care Deductible/Coinsurance After a Set Number of Copays?	<input type="checkbox"/>
# Copays (1-10):	

Plan Description:

Name: DC Gold HNOOnly 1500 90% E
Plan HIOS ID: 73987DC0040058
Issuer HIOS ID: 73987
AVC Version: 2023_1e

Output

Status/Error Messages:

Actuarial Value: 80.77%

Metal Tier: Gold

Additional Notes:

NOTE: One or more services are not subject to the deductible and have no copay. Any service with this cost-sharing structure is covered at 100% by the plan in the deductible range. NOTE: Service-specific cost-sharing is applying for service(s) with fac/prof components, overriding outpatient inputs for those service(s).

Calculation Time:

0.0703 seconds

Draft 2023 AV Calculator

This product, DC Gold HNOOnly 1500 90% E, satisfies the HHS guidelines for a Gold plan with an Actuarial Value of 80.77%

DC Gold HNOOnly 500 80% \$25/50 E M

Actuarial Value Snapshot

The Actuarial Value Calculator (AV Calculator) is designed to give an estimate of network liability for a given plan design. This build of the AV Calculator uses data from a large national commercial database to build continuance tables by metal tier.

User Inputs for Plan Parameters

- Use Integrated Medical and Drug Deductible? ☐
Apply Inpatient Copay per Day? ☒
Apply Skilled Nursing Facility Copay per Day? ☒
Use Separate MOOP for Medical and Drug Spending? ☐
Indicate if Plan Meets CSR or Expanded Bronze AV Standard? ☐

Desired Metal Tier: **Gold**

HSA/HRA Options	Tiered Network Option
HSA/HRA Employer Contribution? <input type="checkbox"/>	Tiered Network Plan? <input type="checkbox"/>
Annual Contribution Amount:	1st Tier Utilization: 2nd Tier Utilization:

Tier 1 Plan Benefit Design			Tier 2 Plan Benefit Design		
Medical	Drug	Combined	Medical	Drug	Combined
Deductible (\$)	\$500.00	\$0.00			
Coinsurance (%; Insurer's Cost Share)	100.00%	100.00%			
MOOP (\$)	\$5,800.00				
MOOP if Separate (\$)					

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Type of Benefit	Tier 1				Tier 2				Tier 1	Tier 2
	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Copay applies only after deductible?	
Medical	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Emergency Room Services	<input type="checkbox"/>	<input type="checkbox"/>		\$300.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
All Inpatient Hospital Services (inc. MH/SUD)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$600.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays)	<input type="checkbox"/>	<input type="checkbox"/>		\$25.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialist Visit	<input type="checkbox"/>	<input type="checkbox"/>		\$50.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Mental/Behavioral Health and Substance Use Disorder Outpatient Services	<input type="checkbox"/>	<input type="checkbox"/>		\$25.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Imaging (CT/PET Scans, MRIs)	<input type="checkbox"/>	<input type="checkbox"/>		\$250.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Speech Therapy	<input type="checkbox"/>	<input type="checkbox"/>		\$30.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Occupational and Physical Therapy	<input type="checkbox"/>	<input type="checkbox"/>		\$30.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preventive Care/Screening/Immunization	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Laboratory Outpatient and Professional Services	<input type="checkbox"/>	<input type="checkbox"/>		\$30.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
X-rays and Diagnostic Imaging	<input type="checkbox"/>	<input type="checkbox"/>		\$50.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Skilled Nursing Facility	<input type="checkbox"/>	<input type="checkbox"/>		\$300.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	<input type="checkbox"/>	<input type="checkbox"/>		\$525.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Surgery Physician/Surgical Services	<input type="checkbox"/>	<input type="checkbox"/>		\$75.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Drugs	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Generics	<input type="checkbox"/>	<input type="checkbox"/>		\$15.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preferred Brand Drugs	<input type="checkbox"/>	<input type="checkbox"/>		\$50.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Non-Preferred Brand Drugs	<input type="checkbox"/>	<input type="checkbox"/>		\$70.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialty Drugs (i.e. high-cost)	<input type="checkbox"/>	<input type="checkbox"/>		\$150.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

Options for Additional Benefit Design Limits:

Set a Maximum on Specialty Rx Coinsurance Payments?	<input type="checkbox"/>
Specialty Rx Coinsurance Maximum:	
Set a Maximum Number of Days for Charging an IP Copay?	<input checked="" type="checkbox"/>
# Days (1-10):	5
Begin Primary Care Cost-Sharing After a Set Number of Visits?	<input type="checkbox"/>
# Visits (1-10):	
Begin Primary Care Deductible/Coinsurance After a Set Number of Copays?	<input type="checkbox"/>
# Copays (1-10):	

Plan Description:

Name: DC Gold HNOOnly 500 80% \$25/50 E M
Plan HIOS ID: 73987DC0040061
Issuer HIOS ID: 73987
AVC Version: 2023_1e

Output

Status/Error Messages:

Actuarial Value: 81.88%

Metal Tier: Gold

NOTE: Service-specific cost-sharing is applying for service(s) with fac/prof components, overriding outpatient inputs for those service(s).

Additional Notes:

Calculation Time: 0.0859 seconds

Draft 2023 AV Calculator

This product, DC Gold HNOOnly 500 80% \$25/50 E M, satisfies the HHS guidelines for a Gold plan with an Actuarial Value of 81.88%

DC Silver HNOnly 4850 80% \$40/80 E M

Actuarial Value Snapshot

The Actuarial Value Calculator (AV Calculator) is designed to give an estimate of network liability for a given plan design. This build of the AV Calculator uses data from a large national commercial database to build continuance tables by metal tier.

User Inputs for Plan Parameters

- Use Integrated Medical and Drug Deductible? ☐
Apply Inpatient Copay per Day? ☐
Apply Skilled Nursing Facility Copay per Day? ☐
Use Separate MOOP for Medical and Drug Spending? ☐
Indicate if Plan Meets CSR or Expanded Bronze AV Standard? ☐

Desired Metal Tier: Silver

HSA/HRA Options	Tiered Network Option
HSA/HRA Employer Contribution? <input type="checkbox"/>	Tiered Network Plan? <input type="checkbox"/>
Annual Contribution Amount:	1st Tier Utilization: 2nd Tier Utilization:

Tier 1 Plan Benefit Design		
Medical	Drug	Combined
Deductible (\$)	\$4,850.00	\$350.00
Coinsurance (%; Insurer's Cost Share)	80.00%	100.00%
MOOP (\$)	\$8,850.00	
MOOP if Separate (\$)		

Tier 2 Plan Benefit Design		
Medical	Drug	Combined

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Type of Benefit	Tier 1				Tier 2				Tier 1	Tier 2
	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Copay applies only after deductible?	
Medical	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Emergency Room Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$400.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
All Inpatient Hospital Services (inc. MH/SUD)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	80%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays)	<input type="checkbox"/>	<input type="checkbox"/>		\$40.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialist Visit	<input type="checkbox"/>	<input type="checkbox"/>		\$80.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Mental/Behavioral Health and Substance Use Disorder Outpatient Services	<input type="checkbox"/>	<input type="checkbox"/>		\$40.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Imaging (CT/PET Scans, MRIs)	<input type="checkbox"/>	<input type="checkbox"/>		\$400.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Speech Therapy	<input type="checkbox"/>	<input type="checkbox"/>		\$65.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Occupational and Physical Therapy	<input type="checkbox"/>	<input type="checkbox"/>		\$65.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preventive Care/Screening/Immunization	<input checked="" type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Laboratory Outpatient and Professional Services	<input type="checkbox"/>	<input type="checkbox"/>		\$60.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
X-rays and Diagnostic Imaging	<input type="checkbox"/>	<input type="checkbox"/>		\$80.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Skilled Nursing Facility	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	80%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	80%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Surgery Physician/Surgical Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	80%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Drugs	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Generics	<input type="checkbox"/>	<input type="checkbox"/>		\$20.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$50.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Non-Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$70.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialty Drugs (i.e. high-cost)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$150.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>

Options for Additional Benefit Design Limits:

Set a Maximum on Specialty Rx Coinsurance Payments?	<input type="checkbox"/>
Specialty Rx Coinsurance Maximum:	
Set a Maximum Number of Days for Charging an IP Copay?	<input type="checkbox"/>
# Days (1-10):	
Begin Primary Care Cost-Sharing After a Set Number of Visits?	<input type="checkbox"/>
# Visits (1-10):	
Begin Primary Care Deductible/Coinsurance After a Set Number of Copays?	<input type="checkbox"/>
# Copays (1-10):	

Plan Description:

Name: DC Silver HNOnly 4850 80% \$40/80 E M
Plan HIOS ID: 73987DC0040057
Issuer HIOS ID: 73987
AVC Version: 2023_1e

Output

Status/Error Messages:

Actuarial Value: 71.82%

Metal Tier: Silver

NOTE: Service-specific cost-sharing is applying for service(s) with fac/prof components, overriding outpatient inputs for those service(s).

Additional Notes:

Calculation Time:

0.0703 seconds

Draft 2023 AV Calculator

This product, DC Silver HNOnly 4850 80% \$40/80 E M, satisfies the HHS guidelines for a Silver plan with an Actuarial Value of 71.82%

DC Bronze HNOOnly 7500 60% \$45/105 E M

Actuarial Value Snapshot

The Actuarial Value Calculator (AV Calculator) is designed to give an estimate of network liability for a given plan design. This build of the AV Calculator uses data from a large national commercial database to build continuance tables by metal tier.

User Inputs for Plan Parameters

- Use Integrated Medical and Drug Deductible? ☐
Apply Inpatient Copay per Day? ☐
Apply Skilled Nursing Facility Copay per Day? ☐
Use Separate MOOP for Medical and Drug Spending? ☐
Indicate if Plan Meets CSR or Expanded Bronze AV Standard? ☒

Desired Metal Tier: **Bronze**

HSA/HRA Options		Tiered Network Option	
HSA/HRA Employer Contribution?	<input type="checkbox"/>	Tiered Network Plan?	<input type="checkbox"/>
Annual Contribution Amount:		1st Tier Utilization:	
		2nd Tier Utilization:	

Tier 1 Plan Benefit Design			Tier 2 Plan Benefit Design		
Medical	Drug	Combined	Medical	Drug	Combined
Deductible (\$)	\$7,500.00	\$850.00			
Coinsurance (%; Insurer's Cost Share)	60.00%	100.00%			
MOOP (\$)	\$9,100.00				
MOOP if Separate (\$)					

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Type of Benefit	Tier 1				Tier 2				Tier 1	Tier 2
	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Subject to Deductible?	Subject to Coinsurance?	Coinsurance, if different	Copay, if separate	Copay applies only after deductible?	
Medical	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Emergency Room Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	60%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
All Inpatient Hospital Services (inc. MH/SUD)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	60%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Primary Care Visit to Treat an Injury or Illness (exc. Preventive, and X-rays)	<input type="checkbox"/>	<input type="checkbox"/>		\$45.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Specialist Visit	<input type="checkbox"/>	<input type="checkbox"/>		\$105.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Mental/Behavioral Health and Substance Use Disorder Outpatient Services	<input type="checkbox"/>	<input type="checkbox"/>		\$27.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Imaging (CT/PET Scans, MRIs)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$500.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Speech Therapy	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$50.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Occupational and Physical Therapy	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$50.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Preventive Care/Screening/Immunization	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>	100%	\$0.00	<input type="checkbox"/>	<input type="checkbox"/>
Laboratory Outpatient and Professional Services	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$55.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
X-rays and Diagnostic Imaging	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$80.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Skilled Nursing Facility	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	70%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Facility Fee (e.g., Ambulatory Surgery Center)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	60%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Outpatient Surgery Physician/Surgical Services	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	60%		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Drugs	<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input checked="" type="checkbox"/> All	<input checked="" type="checkbox"/> All			<input type="checkbox"/> All	<input type="checkbox"/> All
Generics	<input type="checkbox"/>	<input type="checkbox"/>		\$25.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$75.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Non-Preferred Brand Drugs	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$100.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Specialty Drugs (i.e. high-cost)	<input checked="" type="checkbox"/>	<input type="checkbox"/>		\$150.00	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>

Options for Additional Benefit Design Limits:

Set a Maximum on Specialty Rx Coinsurance Payments?	<input type="checkbox"/>
Specialty Rx Coinsurance Maximum:	
Set a Maximum Number of Days for Charging an IP Copay?	<input type="checkbox"/>
# Days (1-10):	
Begin Primary Care Cost-Sharing After a Set Number of Visits?	<input type="checkbox"/>
# Visits (1-10):	
Begin Primary Care Deductible/Coinsurance After a Set Number of Copays?	<input type="checkbox"/>
# Copays (1-10):	

Plan Description:

Name: DC Bronze HNOOnly 7500 60% \$45/105 E M
Plan HIOS ID: 73987DC0040060
Issuer HIOS ID: 73987
AVC Version: 2023_1e

Output

Status/Error Messages:

Actuarial Value: 65.00%

Metal Tier: Bronze

NOTE: Service-specific cost-sharing is applying for service(s) with fac/prof components, overriding outpatient inputs for those service(s).

Additional Notes:

Calculation Time:

0.0547 seconds

Draft 2023 AV Calculator

This product, DC Bronze HNOOnly 7500 60% \$45/105 E M, satisfies the HHS guidelines for a Bronze Expansion plan with an Actuarial Value of 65.00%

Aetna Health Inc. (a PA corp.)
HIOS ISSUER ID: 73987

Exhibit A
Product Portfolio & Projected Membership Distribution

HIOS Plan-ID	Network	Plan	Metallic Tier	Actuarial Value	Exchange Offering	Projected Membership Distribution
73987DC0040060	HMO	DC Bronze HNOly 7500 60% \$45/105 E M	Bronze	65.00%	Yes	1.53%
73987DC0040061	HMO	DC Gold HNOly 500 80% \$25/50 E M	Gold	81.88%	Yes	54.00%
73987DC0040046	HMO	DC Gold HNOly 1650 100% HSA T	Gold	81.35%	Yes	16.70%
73987DC0040017	HMO	DC Gold HNOly 70% \$25/70 E	Gold	81.61%	Yes	16.18%
73987DC0040058	HMO	DC Gold HNOly 1500 90% E	Gold	80.77%	Yes	8.52%
73987DC0040057	HMO	DC Silver HNOly 4850 80% \$40/80 E M	Silver	71.82%	Yes	1.53%
73987DC0040029	HMO	DC Silver HNOly 3000 100% HSA E	Silver	71.98%	Yes	1.53%

Aetna Health Inc. (a PA corp.)
HIOS ISSUER ID: 73987

Exhibit 1
2023 Rate Increases by Product

Product	Average Rate Increase	Minimum Rate Increase	Maximum Rate Increase
ElectChoiceOpenAccess	-7.0%	-12.6%	-4.0%

Exhibit 2
Claim Impact due to Demographic Changes

Age	Experience Period Distribution		Experience Demographic Factor		Projected Period Distribution		Projection Demographic Factor	
	Male	Female	Male	Female	Male	Female	Male	Female
0	0.53%	1.99%	1.050	0.939	0.53%	1.99%	1.050	0.939
1	0.13%	0.00%	1.050	0.939	0.13%	0.00%	1.050	0.939
2	1.99%	0.00%	0.601	0.596	1.99%	0.00%	0.601	0.596
3	1.20%	0.00%	0.601	0.596	1.20%	0.00%	0.601	0.596
4	1.33%	1.06%	0.601	0.596	1.33%	1.06%	0.601	0.596
5	0.27%	0.53%	0.570	0.565	0.27%	0.53%	0.570	0.565
6	0.00%	0.00%	0.570	0.565	0.00%	0.00%	0.570	0.565
7	1.20%	1.60%	0.570	0.565	1.20%	1.60%	0.570	0.565
8	0.40%	0.00%	0.570	0.565	0.40%	0.00%	0.570	0.565
9	0.00%	0.00%	0.570	0.565	0.00%	0.00%	0.570	0.565
10	0.00%	0.80%	0.578	0.565	0.00%	0.80%	0.578	0.565
11	0.00%	0.80%	0.578	0.565	0.00%	0.80%	0.578	0.565
12	0.00%	0.00%	0.578	0.565	0.00%	0.00%	0.578	0.565
13	0.00%	0.00%	0.578	0.565	0.00%	0.00%	0.578	0.565
14	0.00%	0.00%	0.578	0.565	0.00%	0.00%	0.578	0.565
1	0.00%	0.00%	0.606	0.615	0.00%	0.00%	0.606	0.615
16	0.00%	0.00%	0.606	0.615	0.00%	0.00%	0.606	0.615
17	0.00%	0.00%	0.606	0.615	0.00%	0.00%	0.606	0.615
18	0.93%	0.00%	0.606	0.615	0.93%	0.00%	0.606	0.615
19	0.53%	0.00%	0.606	0.615	0.53%	0.00%	0.606	0.615
20	2.53%	0.00%	0.451	0.741	2.53%	0.00%	0.451	0.741
21	0.80%	0.00%	0.451	0.741	0.80%	0.00%	0.451	0.741
22	0.53%	0.00%	0.451	0.741	0.53%	0.00%	0.451	0.741
23	0.00%	0.00%	0.451	0.741	0.00%	0.00%	0.451	0.741
24	0.00%	0.00%	0.451	0.741	0.00%	0.00%	0.451	0.741
25	0.00%	1.33%	0.460	1.106	0.00%	1.33%	0.460	1.106
26	0.66%	2.39%	0.460	1.106	0.66%	2.39%	0.460	1.106
27	1.73%	4.52%	0.460	1.106	1.73%	4.52%	0.460	1.106
28	0.53%	3.72%	0.460	1.106	0.53%	3.72%	0.460	1.106
29	1.06%	0.80%	0.460	1.106	1.06%	0.80%	0.460	1.106
30	2.66%	2.66%	0.519	1.197	2.66%	2.66%	0.519	1.197
31	3.99%	0.13%	0.519	1.197	3.99%	0.13%	0.519	1.197
32	1.20%	1.60%	0.519	1.197	1.20%	1.60%	0.519	1.197
33	0.66%	0.00%	0.519	1.197	0.66%	0.00%	0.519	1.197
34	0.93%	1.20%	0.519	1.197	0.93%	1.20%	0.519	1.197
35	1.46%	0.66%	0.630	1.197	1.46%	0.66%	0.630	1.197
36	0.66%	1.20%	0.630	1.197	0.66%	1.20%	0.630	1.197
37	2.39%	1.99%	0.630	1.197	2.39%	1.99%	0.630	1.197
38	0.53%	1.73%	0.630	1.197	0.53%	1.73%	0.630	1.197
39	0.93%	0.40%	0.630	1.197	0.93%	0.40%	0.630	1.197
40	1.06%	0.13%	0.790	1.197	1.06%	0.13%	0.790	1.197
41	1.46%	1.46%	0.790	1.197	1.46%	1.46%	0.790	1.197
42	0.80%	0.27%	0.790	1.197	0.80%	0.27%	0.790	1.197
43	0.80%	2.53%	0.790	1.197	0.80%	2.53%	0.790	1.197
44	1.73%	0.40%	0.790	1.197	1.73%	0.40%	0.790	1.197
45	2.93%	0.00%	1.000	1.269	2.93%	0.00%	1.000	1.269
46	1.73%	0.00%	1.000	1.269	1.73%	0.00%	1.000	1.269
47	0.40%	0.00%	1.000	1.269	0.40%	0.00%	1.000	1.269
48	2.13%	0.66%	1.000	1.269	2.13%	0.66%	1.000	1.269
49	0.27%	0.93%	1.000	1.269	0.27%	0.93%	1.000	1.269
50	0.53%	1.46%	1.370	1.460	0.53%	1.46%	1.370	1.460
51	0.93%	0.00%	1.370	1.460	0.93%	0.00%	1.370	1.460
52	0.00%	0.00%	1.370	1.460	0.00%	0.00%	1.370	1.460
53	0.13%	0.00%	1.370	1.460	0.13%	0.00%	1.370	1.460
54	0.66%	0.40%	1.370	1.460	0.66%	0.40%	1.370	1.460
55	0.00%	0.27%	1.757	1.745	0.00%	0.27%	1.757	1.745
56	0.53%	0.00%	1.757	1.745	0.53%	0.00%	1.757	1.745
57	1.06%	1.06%	1.757	1.745	1.06%	1.06%	1.757	1.745
58	0.27%	0.53%	1.757	1.745	0.27%	0.53%	1.757	1.745
59	1.33%	1.33%	1.757	1.745	1.33%	1.33%	1.757	1.745
60	0.00%	0.40%	2.218	2.128	0.00%	0.40%	2.218	2.128
61	0.00%	0.00%	2.218	2.128	0.00%	0.00%	2.218	2.128
62	0.00%	0.13%	2.218	2.128	0.00%	0.13%	2.218	2.128
63	0.00%	1.46%	2.218	2.128	0.00%	1.46%	2.218	2.128
64	0.13%	1.06%	2.218	2.128	0.13%	1.06%	2.218	2.128
65+	3.19%	0.53%	3.200	2.700	3.19%	0.53%	3.200	2.700

Experience Period Demographic Factor	1.0546
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Note:
Experience Period Demographic Factor computed as the weighted average of gender specific Demographic Factor by current population distribution.

Projected Demographic Factor	1.0546
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Note:
Projected Demographic Factor computed as the weighted average of gender specific Demographic Factor by projected population distribution.

Demographic Change	1.0000
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Note:
Claim Impact due to Demographic Changes computed as the ratio of the Projected Demographic Factor over the Experience Period Demographic Factor.

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Exhibit 3
Projected Membership Distribution by County

Rating Area	Counties	Experience Period Membership	Experience Period Area Factor	Projected Membership	Projected Area Factor
1	District of Columbia	100%	1.000	100%	1.000

Average Experience Period Area Factor	1.0000
---------------------------------------	--------

Note:

Average Experience Period Area Factor computed as the weighted average of Experience Period Area Factors by experience period membership distribution.

Average Projected Area Factor	1.0000
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Note:

Projected Area Factor computed as the weighted average of Projection Period Area Factors by projected membership distribution.

Area Shift Factor	1.0000
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Note:

Area Shift Factor computed as the ratio of the Projected Membership by Area over the Experience Membership by Area Factor represents:
The impact due to the shift of the population distribution across areas.

Area Factor Change	1.0000
--------------------	--------

Note:

Area Factor Change computed as the ratio of the Projected Area Factor over the Experience Area Factor both using experience membership
Factor represents:
The impact due to cost relativity changes, including changes to provider networks and contracts, from the experience period to the rating period.

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Exhibit 4

Projected Membership and Paid to Allowed by Metal Tier

Metallic Tier	Projected Membership	Projected Paid to Allowed Ratio
Platinum	0	N/A
Gold	560	94%
Silver	18	83%
Bronze	9	73%
Catastrophic	0	N/A
Total	587	93%

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Exhibit 5
Retention as a Percent of Premium and PMPM

Retention Components	% of Premium	PMPM
Administrative Expense Load	11.43%	\$59.80
Profit & Risk Load	4.74%	\$24.79
Premium Tax	3.09%	\$16.16
State User Exchange Fee	0.83%	\$4.32
Federal Based Exchange Fee	0.00%	\$0.00
HIF	0.00%	\$0.00
Risk Adjustment User Fee and PCORI	0.09%	\$0.45
Federal Income Tax	1.26%	\$6.59
Total Taxes and Fees	5.26%	\$27.52

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Exhibit 6
MLR Projection

			Formula
(a)	Premium (pmpm)	\$523.06	
(b)	Medical Cost (pmpm)	\$410.95	
(c)	Medical Benefit Ratio (MBR)	78.6%	= (c) / (b)
(d)	Quality Improvement Action (pmpm)	\$3.14	= (a) x 0.60%
(e)	Taxes and Fees (pmpm)	\$27.52	
(f)	Adjusted Premium (pmpm)	\$495.54	=(a) - (e)
(g)	Adjusted Claims (pmpm)	\$414.08	= (b) + (d)
	Medical Loss Ratio (MLR)	83.6%	=(g) / (f)

Notes:

ACA adjustments for QIA and taxes and fees are estimates based on historical experience and projected expenses.

Values reflect current actuarial projections and will differ from the final reported MLR.

This projection applies to the products included in this filing and is a standalone calculation for the 2023 calendar year. This projection differs from the MLR calculation specified by PPACA which includes three years of experience for all business in the MLR pool.

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Exhibit 7
Quarterly Trend Factors

Effective Quarter	Membership	Trend Factor	Index Rate
1Q 2023	77.7%	1.000	\$691.72
2Q 2023	9.5%	1.025	\$709.32
3Q 2023	7.6%	1.052	\$727.36
4Q 2023	5.2%	1.078	\$745.87
Total	100.0%	1.010	\$698.91

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Exhibit 8
Trend Exhibit

Service Type	Unit Cost	Utilization	Total Allowed
Facility Inpatient	5.0%	3.0%	8.2%
Facility Outpatient	3.4%	6.5%	10.2%
Physician	1.6%	6.0%	7.7%
Capitation	0.0%	0.0%	0.0%
Medical	3.4%	4.7%	8.3%
Pharmacy	9.9%	2.6%	12.7%
Total (Med + Rx)	6.2%	3.8%	10.2%

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Exhibit 9

Sample Rate Calculation

The following steps outline the mathematical formula used to develop the member level rates for a sample small group. The input assumptions and the census provided below are for illustrative purposes only.

Sample Small Group Information:

Effective Date: 1/1/2023
Rating Area: Rating Area 1
Plan: DC Silver HNOnly 4850 80% \$40/80 E M

<u>Group Census</u>	Employee Age	Spouse Age	Child 1 Age	Child 2 Age	Child 3 Age
Employee 1	35	36	5	7	
Employee 2	56	52			
Employee 3	24	21			
Employee 4	52	49	19	17	16
Employee 5	65	65	25		
Employee 6	58	60	24		
Employee 7	56	51			
Employee 8	42	41			
Employee 9	33	34	5	6	7
Employee 10	25	28	2	1	

Age and Tobacco

Factors

	Age Factors				
	Employee	Spouse	Child 1	Child 2	Child 3
Employee 1	0.876	0.896	0.654	0.654	
Employee 2	1.801	1.545			
Employee 3	0.727	0.727			
Employee 4	1.545	1.377	0.654	0.654	0.654
Employee 5	2.181	2.181	0.727		
Employee 6	1.944	2.099	0.727		
Employee 7	1.801	1.487			
Employee 8	1.053	1.013			
Employee 9	0.836	0.856	0.654	0.654	0.654
Employee 10	0.727	0.744	0.654	0.654	

Calculation of Monthly Premium

Step 1: Multiply Market Base Rate x Rating Area Factor x Plan Factor x Effective Date Factor

Market Base Rate =	\$536.88
x Rating Area Factor (Rating Area 1)	1.0000
x Plan Factor	0.7126
x Effective Date Factor	1.0000
Market Base Rate adjusted for Plan/Area/Effective Date =	\$382.56

Step 2: Multiply Adjusted Market Base Rate in Step 1 by the Member level Age and Tobacco Factors:

Member Monthly Rates	Employee	Spouse	Child 1	Child 2	Child 3	Total
Employee 1	\$335.12	\$342.77	\$250.19	\$250.19		\$1,178.27
Employee 2	\$688.99	\$591.06				\$1,280.05
Employee 3	\$278.12	\$278.12				\$556.24
Employee 4	\$591.06	\$526.79	\$250.19	\$250.19	\$250.19	\$1,868.42
Employee 5	\$834.33	\$834.33	\$278.12			\$1,946.78
Employee 6	\$743.70	\$802.99	\$278.12			\$1,824.81
Employee 7	\$688.99	\$568.87				\$1,257.86
Employee 8	\$402.84	\$387.53				\$790.37
Employee 9	\$319.82	\$327.47	\$250.19	\$250.19	\$250.19	\$1,397.86
Employee 10	\$278.12	\$284.62	\$250.19	\$250.19		\$1,063.12
Group Total Monthly Premium:						\$13,163.78

Note: Member level monthly rates are rounded to the nearest penny.

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Exhibit 10
Plan Mapping

2021 HIOS Plan ID	2021 Plan Name	2022 HIOS Plan ID	2022 Plan Name	2023 HIOS Plan ID	2023 Plan Name
73987DC0040056	DC Bronze HNOOnly 6000 80% \$15/50 E	73987DC0040056	DC Bronze HNOOnly 6000 80% \$15/50 E	73987DC0040060	DC Bronze HNOOnly 7500 60% \$45/105 E M
73987DC0040058	DC Gold HNOOnly 1500 90% E	73987DC0040058	DC Gold HNOOnly 1500 90% E	73987DC0040058	DC Gold HNOOnly 1500 90% E
73987DC0040046	DC Gold HNOOnly 1650 100% HSA T	73987DC0040046	DC Gold HNOOnly 1650 100% HSA T	73987DC0040046	DC Gold HNOOnly 1650 100% HSA T
73987DC0040021	DC Gold HNOOnly 500 90% \$25/40 E	73987DC0040021	DC Gold HNOOnly 500 90% \$25/40 E	73987DC0040061	DC Gold HNOOnly 500 80% \$25/50 E M
73987DC0040017	DC Gold HNOOnly 70% \$25/40 E	73987DC0040017	DC Gold HNOOnly 70% \$25/40 E	73987DC0040017	DC Gold HNOOnly 70% \$25/70 E
73987DC0040059	DC Silver HNOOnly 2800 90% HSA E	73987DC0040029	DC Silver HNOOnly 3000 100% HSA E	73987DC0040029	DC Silver HNOOnly 3000 100% HSA E
73987DC0040029	DC Silver HNOOnly 3000 100% HSA E	73987DC0040029	DC Silver HNOOnly 3000 100% HSA E	73987DC0040029	DC Silver HNOOnly 3000 100% HSA E
73987DC0040057	DC Silver HNOOnly 4800 80% \$25/45 E	73987DC0040057	DC Silver HNOOnly 4800 80% \$25/45 E	73987DC0040057	DC Silver HNOOnly 4850 80% \$40/80 E M

Aetna Life Insurance Company
HIOS ISSUER ID: 73987

Exhibit 11
Projected Age/Gender Distribution

Age	Male	Female	DC Age Factor
0-14	7.05%	6.78%	0.654
15	0.00%	0.00%	0.654
16	0.00%	0.00%	0.654
17	0.00%	0.00%	0.654
18	0.93%	0.00%	0.654
19	0.53%	0.00%	0.654
20	2.53%	0.00%	0.654
21	0.80%	0.00%	0.727
22	0.53%	0.00%	0.727
23	0.00%	0.00%	0.727
24	0.00%	0.00%	0.727
25	0.00%	1.33%	0.727
26	0.66%	2.39%	0.727
27	1.73%	4.52%	0.727
28	0.53%	3.72%	0.744
29	1.06%	0.80%	0.760
30	2.66%	2.66%	0.779
31	3.99%	0.13%	0.799
32	1.20%	1.60%	0.817
33	0.66%	0.00%	0.836
34	0.93%	1.20%	0.856
35	1.46%	0.66%	0.876
36	0.66%	1.20%	0.896
37	2.39%	1.99%	0.916
38	0.53%	1.73%	0.927
39	0.93%	0.40%	0.938
40	1.06%	0.13%	0.975
41	1.46%	1.46%	1.013
42	0.80%	0.27%	1.053
43	0.80%	2.53%	1.094
44	1.73%	0.40%	1.137
45	2.93%	0.00%	1.181
46	1.73%	0.00%	1.227
47	0.40%	0.00%	1.275
48	2.13%	0.66%	1.325
49	0.27%	0.93%	1.377
50	0.53%	1.46%	1.431
51	0.93%	0.00%	1.487
52	0.00%	0.00%	1.545
53	0.13%	0.00%	1.605
54	0.66%	0.40%	1.668
55	0.00%	0.27%	1.733
56	0.53%	0.00%	1.801
57	1.06%	1.06%	1.871
58	0.27%	0.53%	1.944
59	1.33%	1.33%	2.020
60	0.00%	0.40%	2.099
61	0.00%	0.00%	2.181
62	0.00%	0.13%	2.181
63	0.00%	1.46%	2.181
64	0.13%	1.06%	2.181
65+	3.19%	0.53%	2.181

Age Calibration Factor	1.043
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Note:

Age Calibration Factor
computed as the weighted average of
HHS Age Factor by projected membership
distribution.

Weighted Average Age	42
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Note:

This is the age that most closely
corresponds to the age calibration factor.

Aetna Health Inc. – District of Columbia
1Q23 Filing - Small Group Business
HIOS product ID: 73987DC004
Actuarial Memorandum

Statement of Purpose for Filing

This actuarial memorandum supports Aetna Health Inc. commercial base rates for District of Columbia small groups effective beginning January 1, 2023. The purpose of this memorandum is to comply with the District of Columbia, Department of Insurance, Securities and Banking, Health Insurance Rate Filing Procedures and to provide adequate supporting information for our proposed rates pursuant to the DC Official Code, Title 31, Subtitle IV, Chapter 34.

The requested rates have been developed incorporating consideration of the market changes and rating requirements taking effect in the Small Group market pursuant to the Patient Protection and Affordable Care Act of 2010 and subsequent regulation. They are compliant with all rating limitations under federal and state regulation. The plan designs contained in this submission are to be sold on the Exchange.

The descriptions and analyses presented in this rate filing reflect our current understanding of regulations and guidance. As further guidance is received, we reserve the right to submit revisions or withdraw this rate filing.

Summary of Changes from prior filing and rate manual

We are proposing to revise the quarterly premium rates for effective dates from January 1, 2023 through December 31, 2023. The quarterly rate increases are reflected in Exhibit 7. Generally, rate changes do not vary by plan design, with the exception of the impact associated with plan-specific benefit modifications necessary to comply with Actuarial Value requirements.

Rates for the plans in this submission are being revised to reflect 1) the impact of updated experience data and medical claim trend and 2) changes in cost-sharing levels to ensure that plans comply with Actuarial Value requirements.

There are no other proposed changes for this submission.

Form Numbers

An exhibit showing the Form Numbers is shown on under the "Certificate of Form Names and Numbers" Exhibit of this Actuarial Memorandum.

Status of Forms

The forms for this submission are "open to new sales" and "non-grandfathered".

Description of Benefits/Metal Levels and Actuarial Values

This filing covers HMO group medical benefit coverage. The range of coverage includes inpatient, outpatient, primary care, specialist services, pharmacy, DME, and vision. Information on the cost-sharing parameters of the covered benefit plans, including deductibles and copays, can be found in the Schedule of Benefits in the Form filing (AETN-133139939). All benefits are compliant with state mandates and the requirements of the Patient Protection and Affordable Care Act of 2010, including preventive care benefits, deductible limits, and Actuarial Value requirements.

Exhibit A shows the metal level and actuarial value for each plan design using the AV calculator developed and made available by HHS.

Average Rate Increase Requested

The following tables provide the requested weighted average increases. The first table shows the incremental increase and the second table shows the year over year increase.

	1Q23/4Q22	2Q23/1Q23	3Q23/2Q23	4Q23/3Q23
Incremental Rate Increase	-12.54%	2.54%	2.54%	2.54%

	1Q23/1Q22	2Q23/2Q22	3Q23/3Q22	4Q23/4Q22	Average
Requested Rate Increase	-7.20%	-6.70%	-6.20%	-5.69%	-7.03%

Maximum Rate Increase Requested

The maximum rate increase that could be applied to a policyholder based on changes to the base rate and rate factors is -2.25%. This rate increase applies to members renewing in 4Q23 for the DC Silver HNOly 4850 80% \$40/80 E M plan (HIOS ID 73987DC0040057).

Minimum Rate Increase Requested

The minimum rate increase that could be applied to a policyholder based on changes to the base rate and rate factors is -13.54%. This rate increase applies to members renewing in 1Q23 for the DC Silver HNOly 3000 100% HSA E plan (HIOS ID 73987DC0040029).

Absolute Maximum Premium Increase

The absolute maximum year-over-year renewal rate increase that could be applied to a policyholder, including demographic changes like aging, is 8.66%. This rate increase applies to members renewing in 1Q23 for DC Silver HNOly 4850 80% \$40/80 E M plan (HIOS ID 73987DC0040057) that age up from 20 to 21.

Average Renewal Rate Increase for a Year

The average renewal rate increase, weighted by written premium, for renewals in the year ending with the effective period of the rate filing is -7.03%

Rate Change History

The rate change history for the forms referenced in the filing is shown below.

Rate Effective Date	Annual Total Change
4Q21	0.9%
1Q22	-5.9%
2Q22	-6.5%
3Q22	-7.2%
4Q22	-7.9%

Exposure

The current exposure as of December 2021 is 15 policies, 40 certificates, and 62 covered lives.

Member Months

The numbers of members in force during each month of the base experience used in the rate development and for the preceding 12-month period for the forms referenced in this filing are shown in the Loss Ratio History Exhibit of the Actuarial Memorandum.

Past Experience

The monthly earned premium and incurred claims for the base experience period used in the rate development and for the preceding 12-month period for the forms referenced in this filing are shown in the Loss Ratio History Exhibit of the Actuarial Memorandum.

Index Rate

The index rate = \$691.72

Rate Development

Determination of Claim Portion of Market Index Rate

In setting the projected claim level in the market in 2023, we based our projections upon the 2020 and 2021 experience of our current ACA small group block of business for Innovation Health Plan, Inc. and Innovation Health Insurance Company, in the 2-50 market. The experience data utilized in the rate development reflects incurred claims from January 1, 2020 to December 31, 2021 and paid through March 2022. This manual experience is the HMO Small Group Experience for Innovation Health Plan, Inc. and PPO Small Group Experience for Innovation Health Insurance Company in Northern Virginia.

The manual experience used to develop the rates is shown below:

DOS	Membership	Claims	Premium *	Loss Ratio
1/1/2021	3,436	1,248,219	2,038,508	61.23%
2/1/2021	3,380	1,417,148	2,002,428	70.77%
3/1/2021	3,307	1,501,896	1,965,240	76.42%
4/1/2021	3,191	1,019,792	1,897,964	53.73%
5/1/2021	3,129	1,131,505	1,861,325	60.79%
6/1/2021	3,059	1,393,598	1,825,360	76.35%
7/1/2021	2,984	966,762	1,772,846	54.53%
8/1/2021	2,945	1,182,812	1,750,802	67.56%
9/1/2021	2,894	1,296,500	1,721,659	75.31%
10/1/2021	2,820	1,211,818	1,681,445	72.07%
11/1/2021	2,788	3,905,124	1,662,300	234.92%
12/1/2021	2,679	1,428,778	1,595,837	89.53%
Total	36,612	17,703,952	21,775,713	81.30%

*Note: Premiums shown are not risk adjusted. The current estimate of the 2021 risk-adjusted loss ratio is 81.9%.

Total incurred claims are developed by estimating the incurred but not reported (IBNR) reserves using aggregate block of business paid claims. Paid claims are adjusted using the IBNR completion factors. More specifically, historical claim payment patterns are used to predict the ultimate incurred claims for each date-of-service month. The IBNR is estimated using actuarial principles and assumptions which consider historical claim submission and adjudication patterns, unit cost and utilization trends, claim inventory levels, changes in membership and product mix, seasonality, and other relevant factors including a review of large claims. This same process is used to develop IBNR estimates for allowed claims.

As noted above, the experience period reflects three months of paid claim run-off. The IBNR reserves account for approximately 1.25% of the experience period incurred claims.

For the projection, the following was taken into consideration:

A. Changes in the Morbidity of the Population Insured:

The experience period data includes experience for policies issued to small employers in 2020 and 2021. We considered the expected relationships between the morbidity of the experience policies and the likely population that will be covered by Small Group Single Risk Pool policies in 2023.

B. Changes in Benefits:

The products included in this filing include benefits necessary to comply with the Essential Health Benefit requirements. The experience data includes experience for Single Risk Pool products that have essentially identical benefits.

The change in projected utilization due to changes in benefits is also considered. As cost sharing decreases (measured by increasing Actuarial Value), utilization increases. This pattern is reflected in the factors that are built into the federal risk adjustment mechanism that started in 2014. The federal risk adjustment program factors and other proprietary models were considered in the development of the utilization change. The average cost sharing in the experience period was compared with the average cost sharing in the projection period. From the average cost sharing change, an expected utilization change was derived.

C. Changes in Demographics:

Experience data was normalized for projected changes in the age/gender mix and area mix using internally-developed factors. Exhibits 2 and 3 contain detail on the calculations of the impact of demographic mix shifts.

D. Other Adjustments:

The 'Other' adjustment includes the projected impact of changes in network composition and provider contracts.

Determination of Retention Portion of Market Index Rate

The retention portion of the projected premium is illustrated in Exhibit 5.

The prospective general and administrative expenses are based on historical corporate small group market expense levels, current-year projections, and projected changes in expenses, inflation, and membership for 2023. The commission expense factor covers anticipated sales and marketing expenses. Those may include, without limitation, purchase of television, internet, and other advertising; payments of commissions and other incentive compensation to Company's internal sales force; and payment of commissions to external brokers. The exact amounts and distribution among the categories of sales and marketing expenses will depend on a variety of factors including competitive conditions, business strategy, consumer behaviors, and legal and regulatory requirements. The consumer behaviors would capture whether they use a particular distribution channel, commissioned or not, as well as their experience.

Federal taxes include PPACA Taxes and Fees are based on the Notice of Benefit and Payment Parameters for 2023, as well as Federal income tax. The risk adjustment user fee is applied to the

projected risk adjustment transfer and therefore, excluded from the taxes and fees shown under non-benefit expenses. State premium taxes are estimated on most current known levels and include any known assessments.

The profit and risk load is consistent with the target used in our initial pricing of 2022.

Aetna recognizes that COVID-19 has had an impact on the level of allowed and incurred claims in the experience period of January 1, 2021 through December 31, 2021. We have internally developed factors to adjust 2021 experience, using calendar year 2019 experience as our baseline claims data. Adjustment factors for allowed claims and incurred claims were developed separately and have been applied as such. These factors were developed using experience paid-thru January 31, 2022.

Requested Rates

Rates are determined using the prescribed member build-up approach. In the event that a family includes more than three dependents under age 21, only the three oldest dependents will be considered in determining the family's premium. Additional dependents (non-billable members) will not be included in the rate calculation.

The premium for each billable member is calculated as:
 $\text{Calibrated Plan Adjusted Index Rate} * \text{Age Factor} * \text{Area Factor} * \text{Trend Factor}$

The resulting rate is rounded to the nearest cent, and rates are then summed for all billable family members.

An example of a contract's premium determined by the member build-up calculation is shown in Exhibit 9.

Credibility Assumption

Experience data for the District of Columbia is assigned 12% credibility.

Trend Assumption

Anticipated annual trend from the experience period to the rating period for the product line is shown in the following table. The table shows the trend assumptions by major types of service as defined by HHS, separately by unit cost, utilization, and in total.

Type of Service	Unit Cost	Utilization	Total
Inpatient Hospital	5.0%	3.0%	8.2%
Outpatient Hospital	3.4%	6.5%	10.2%
Professional	1.6%	6.0%	7.7%
Other Medical	3.4%	6.5%	10.2%
Capitation	0.0%	0.0%	0.0%
Prescription Drug	9.9%	2.6%	12.7%
Total	6.2%	3.8%	10.2%

a. Medical Trend

Allowed medical trend includes known and anticipated changes in provider contract rates, severity and medical technology impacts, and expected changes in utilization. The impact of benefit leveraging is accounted for separately in the projected paid to allowed ratio.

b. Pharmacy Trend

Pharmacy trend considers the impact of formulary changes, patent expirations, new drugs, other general market share shifts, and overall utilization trend.

Cost-sharing changes & Benefit Changes

Aetna's rate review models project incurred claims and earned premiums assuming a static benefit plan mix for the book of business for the experience period. Since Aetna prices the book of business utilizing a target loss ratio approach, adjustments made to the incurred claims and earned premiums to account for the anticipated changes to the plan mix would offset resulting in the same projected loss ratio. The Plan Relativity Factors adjust future premium levels to align with the expected claims for changes in plan mix for future dates of service.

Plan Relativities

The Plan Relativities represent the expected value of the difference in benefits and networks between the market index rate and each additional proposed benefit plan discussed in this filing. The relativities were developed using a proprietary pricing model which relies on State- and product-specific benefit service category weights and rating factors for various levels of plan/member cost-sharing options for deductibles, coinsurance, out-of-pocket maximums and copays.

The product-specific service category weights were developed based on the experience of Aetna's Small Group block of business. The cost-sharing-specific rating factors were developed using experience associated with our Large Group block of business, which excludes the effects of selection. These Large Group based cost-sharing specific rating factors account for differences in a standard population's spending patterns due to differences in the richness and/or structure of benefits, or induced demand, without reflection of differences in health status.

Final plan relativities reflect the value of the EHB and state mandated benefits (including pediatric dental), incorporating the impact of out-of-network benefits and additional benefits. The methodology also considers the value of any differences in network by plan, including but not limited to network discounts and steerage.

Rating Factors

Effective Date Factors

Exhibit 7 illustrates the quarterly trend factors, the resulting index rate for effective dates during each calendar quarter, the projected membership distribution by effective date, and the weighted-average index rate. Trend factors are developed from annual forward trend and leveraging. A trend factor of 1.00 corresponds to a policy period that begins January 1, 2023.

Member Age Factor

The age factors are based on the DC specific age scale. The factors are shown in Exhibit 11.

Tobacco Factors

No load is proposed for tobacco users.

Area Factors

Exhibit 3 summarizes the rating area definitions and factors and displays the projected membership by area to develop the projected average area factor. The geographic calibration factor is the reciprocal of the projected average area factor.

Wellness Programs

Aetna may encourage and incent members to access certain medical services, to use online tools that enhance their coverage and services, and to continue participation as an **Aetna** member. Members and

their doctor can talk about these medical services and decide if they are right for the member. Aetna may also encourage and incent members in connection with participation in a wellness or health improvement program. Incentives include but are not limited to:

- Modification to **copayment, deductible or coinsurance** amounts
- **Premium** discounts or rebates
- Contributions to health savings account
- Fitness center membership reimbursement
- Merchandise
- Coupons
- Gift cards
- Debit cards
- Any combination of the above

The award of any such incentive shall not depend upon the result of a wellness or health improvement activity or upon a member's health.

Distribution of Rate Increases

The distribution of rate increases (annual) is shown in Exhibit A-1. The increases are shown by Plan.

Claim Reserve Needs

Total incurred claims are developed by estimating the incurred but not reported (IBNR) reserves using aggregate block of business paid claims. Paid claims are adjusted using the IBNR completion factors. More specifically, historical claim payment patterns are used to predict the ultimate incurred claims for each date-of-service month. The IBNR is estimated using actuarial principles and assumptions which consider historical claim submission and adjudication patterns, unit cost and utilization trends, claim inventory levels, changes in membership and product mix, seasonality, and other relevant factors including a review of large claims. This same process is used to develop IBNR estimates for allowed claims.

The experience data reflects incurred claims from January 1, 2021 through December 31, 2021 and paid through March 31, 2022. The paid claims for the DC Base experience period are \$412,109. The estimated incurred claims are \$417,320.

Administrative Costs of Programs that Improve Health Care Quality

The administrative costs included with claims in the numerator of the MLR calculation are shown in Exhibit 6 (MLR Projection).

Taxes and Licensing or Regulatory Fees

The taxes, licenses and fees removed from premium in the denominator of the MLR calculation are shown in Exhibit 6 (MLR Projection).

Medical Loss Ratio (MLR)

The projected Medical Loss Ratio (MLR) as defined by HHS is 83.6% and meets the minimum MLR requirements of Insurance Art. § 15-605(c). The details of the MLR calculation are shown in Exhibit 6 (MLR Projection).

Risk Adjustment

Risk Adjustment – Experience Period

Risk Adjustment transfer is accrued at the issuer and market level based on 2021 CMS Interim data. The transfer is allocated to the member-level based by applying the HHS risk transfer calculation to each member relative to the imputed market average; such that members with higher resulting relative transfer scores may have a receivable and members with lower resulting scores may have a payable, regardless of the net market risk transfer result. The resulting member transfers are summed to the HIOS plan level and adjusted for 2021 Risk Adjustment fees of \$0.25 PMPM in Worksheet 2.

Risk Adjustment – Projection Period

Aetna is projecting a risk adjustment receivable. We expect that we will have membership enrolled under the market average morbidity. The resulting PMPM adjustment, net of risk adjustment user fees, is \$235.25 PMPM.

Reinsurance

Transitional Reinsurance recoveries do not apply to Small Group business. The experience period data does not contain Reinsurance Contributions during 2021.

Risk Corridor

The Risk Corridor program does not apply to Small Group business.

Past and Prospective Loss Experience Within and Outside the State

The loss experience used in the development of the rates was based on the HMO Small Group experience for Innovation Health Plan, Inc. and PPO Small Group experience for Innovation Health Insurance Company in Northern Virginia.

Reasonable Margin for Reserve Needs & Past and Prospective Expenses

The retention portion of the projected premium is illustrated in Exhibit 5.

The prospective general and administrative expenses are based on historical corporate small group market expense levels, current-year projections, and projected changes in expenses, inflation, and membership for 2023. The commission expense factor covers anticipated sales and marketing expenses. Those may include, without limitation, purchase of television, internet and other advertising; payments of commissions and other incentive compensation to the Company's internal sales force; and payment of commissions to external brokers. The exact amounts and distribution among the categories of sales and marketing expenses will depend on a variety of factors including competitive conditions, business strategy, consumer behaviors, and legal and regulatory requirements. The consumer behaviors would capture whether they use a particular distribution channel, commissioned or not, as well as their experience.

Federal taxes include PPACA Taxes and Fees are based on the Notice of Benefit and Payment Parameters for 2023, as well as Federal income tax. State premium taxes are estimated on most current known levels and include any known assessments.

The profit and risk load is consistent with the target used in the initial pricing for our 2022 plans.

Any Other Relevant Factors Within and Outside the State

All relevant Factors within and outside the State have been considered in the development of the proposed rates.

Any other information needed to support the requested rates or to comply with Actuarial Standard of Practice No. 8

This filing is in conformity with all the applicable Actuarial Standards of Practice, including ASOP No. 8.

Actuarial Certification

I, Joanna Kluza, am an employee of Aetna Inc. and a member of the American Academy of Actuaries. I have reviewed the enclosed rates submitted by Aetna Health Inc. for the District of Columbia.

These rates reflect the negotiated prices from the provider contracts and the expected utilization experience of the plan.

I relied upon financial records and summaries prepared by responsible officers and employees of Aetna Health Inc. In other respects, my analysis included review of assumptions that I considered necessary.

For preparation of the rates, items identified above:

- (i). are computed in accordance with commonly accepted actuarial standards consistently applied and are fairly stated in accordance with sound actuarial principles,
- (ii). meet the requirements of Washington D.C.,
- (iii). make a good and sufficient provision for all unpaid claims of the organization under the terms of its contracts and agreements, and
- (iv). include appropriate provision for all actuarial items which ought to be established where allowed by law.

A target medical loss ratio of 78.6% was used for this filing calculated in the traditional way. The expected 2023 MLR for this filing, as defined by PPACA and before any credibility adjustment, is 83.6%.

These rates are appropriate for quotes delivered for effective dates beginning January 1, 2023. The proposed change is not an increase greater than the 15% threshold and will not trigger the federal review requirements as specified under 45 CFR Part 154.

This rate filing conforms to the benefit plan provisions required by the Patient Protection and Affordable Care Act (P.L. 111-148) of 2010.

In my opinion, the enclosed rates are reasonable in relation to the anticipated experience of Aetna Health Inc. They are neither excessive nor inadequate, nor unfairly discriminatory.



Joanna Kluza, ASA, MAAA
Aetna Health Inc.

May 2, 2022
Date

**District of Columbia Small Group
 AHI (HMO plans) Loss Ratio History**

1/1/2020	111	39,558	58,027	91.13%
2/1/2020	104	14,423	55,347	80.25%
3/1/2020	98	30,777	51,570	71.83%
4/1/2020	93	21,889	49,444	61.25%
5/1/2020	91	27,337	48,342	75.05%
6/1/2020	89	21,130	48,458	67.64%
7/1/2020	87	32,714	48,364	59.24%
8/1/2020	87	26,284	47,302	54.64%
9/1/2020	85	17,389	47,321	58.90%
10/1/2020	84	24,531	46,922	47.42%
11/1/2020	71	17,144	41,669	46.16%
12/1/2020	70	7,390	41,528	60.02%
1/1/2021	62	23,339	37,503	62.23%
2/1/2021	61	8,553	36,405	23.49%
3/1/2021	61	40,881	36,420	112.25%
4/1/2021	61	20,403	36,715	55.57%
5/1/2021	64	16,604	37,966	43.73%
6/1/2021	65	100,204	38,626	259.42%
7/1/2021	64	26,370	37,649	70.04%
8/1/2021	64	42,459	38,020	111.68%
9/1/2021	64	41,729	38,091	109.55%
10/1/2021	64	28,722	38,054	75.48%
11/1/2021	62	36,477	37,205	98.04%
12/1/2021	60	31,579	36,405	86.74%
CY2020	1,070	280,566	584,295	48.02%
CY2021	752	417,320	449,060	92.93%
1/1/2020	111	39,558	58,027	91.13%

*Note: Premiums shown are not risk adjusted. The current estimate of the 2021 risk adjusted loss ratio is 68.5%.

Certificate Form Names and Numbers

<i>Form Name</i>	<i>Form Number</i>
HI DC SG HHIXCOC V007	HI SG HCOC-2023 07-HIX
Policy	HI SG HGrpAg-1A 01

Schedule Form Names and Numbers

<i>Form Name</i>	<i>Form Number</i>
HI DC SG HHIX COC V007	HI DC SG HIX SOB HMO 14050623
HI DC SG HHIX COC V007	HI DC SG HIX SOB HMO 14050620
HI DC SG HHIX COC V007	HI DC SG HIX SOB HMO 14051070
HI DC SG HHIX COC V007	HI DC SG HIX SOB HMO 14050626
HI DC SG HHIX COC V007	HI DC SG HIX SOB HMO 14051071
HI DC SG HHIX COC V007	HI DC SG HIX SOB HMO 14051069
HI DC SG HHIX COC V007	HI DC SG HIX SOB HMO 14050621